UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
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AUG 27 2013

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Robert D. Elliott
Executive Director
Southwest Clean Air Agency
11815 NE 99th Street, Suite 1294
Vancouver, Washington 98682-2322

Dear Mr. Elliott:

Enclosed is the U.S. Environmental Protection Agency's final report on the State Review Framework (SRF) review of the Southwest Clean Air Agency's compliance and enforcement program. In addition to evaluating SWCAA's program, this SRF review also evaluated the air program of the Puget Sound Clean Air Agency and the air, hazardous waste, and water programs of the Washington State Department of Ecology (Ecology). The report also includes summary information on the Permit Quality Review for the National Pollutant Discharge Elimination System (NPDES) permitting program for Ecology.

I appreciate the cooperation of your managers and staff in assisting with this review and providing helpful responses to the findings in the draft report. The final report shows that SWCAA is meeting or exceeding most of the SRF metric measures. EPA will continue to work with SWCAA in the areas where the report identifies concerns.

The final report follows the format specified by national SRF guidance, including the need for specific, measurable action items. The follow-up action items are tracked in a national database called the SRF Tracker, and the report will be posted on a publicly available website. EPA-Region 10 will provide periodic updates on progress toward completion of SRF action items to EPA's Office of Enforcement and Compliance Assurance.

EPA looks forward to continuing our positive working relationship with SWCAA. If you have any questions regarding the SRF report, Lauris Davies, Associate Director, Office of Compliance and Enforcement, is our primary management contact for SRF, and our key staff coordinator is Christine Kelly if your staff have questions. Lauris can be reached by phone at (206) 553-2857 or by email at Davies.Lauris@epa.gov, and Christine's contact information is (206) 553-0718 and Kelly.Christine@epa.gov.

Sincerely,

Edward J. Kowalski
Director

Enclosure

cc by email: Randy Peltier
Southwest Clean Air Agency

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AUG 30 2013
SOUTHWEST CLEAN AIR AGENCY

STATE REVIEW FRAMEWORK AND INTEGRATED CLEAN WATER ACT PERMIT QUALITY REVIEW

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Washington

Clean Water Act, Clean Air Act, and Resource Conservation and Recovery Act Implementation in Federal Fiscal Year 2011

U.S. Environmental Protection Agency
Region 10, Seattle

Final Report
August 20, 2013

Note to Users

This report is structured in four parts, with three media sections and one overarching Executive Summary. The intent of this structure is to allow the user to choose to look exclusively at one media-specific set of information, to look at just Permit Quality Review (PQR) or State Review State Review Framework (SRF) information individually, or to look at all at issues across all media programs.

To review Clean Water Act (CWA) information only, see the sections titled "CWA-NPDES Integrated PQR & SRF Review," "CWA-NPDES Permit Quality Review," and "State Review Framework Report: Clean Water Act Review."

If you are interested in reviewing the CWA PQR information only, see the section titled "CWA-NPDES Permit Quality Review."

If you are interested in reviewing the SRF information across all programs, look to the section titled State Review Framework Report.

If you are interested in reviewing information related to the Resource Conservation and Recovery Act only, look to the section titled Resource Conservation and Recovery Act.

If you are interested in reviewing information related to the Clean Air Act, look to the section titled Clean Air Act.

Information in this report related to the CWA National Pollutant Discharge Elimination System (NPDES) permit reviews under the PQR and NPDES enforcement under the SRF have been integrated as part of the EPA's 2009 Clean Water Act Action Plan. Information is not integrated in this report for reviews of the State's Clean Air Act (CAA) and RCRA programs because the SRF only examines enforcement information, and permit oversight under the CAA and RCRA programs are conducted through different mechanisms not associated with this review process.

The NPDES integrated oversight effort is a way to provide EPA with a comprehensive understanding of permitting and compliance elements of the NPDES program. Integrated reviews reduce the burden on States by having one joint visit and integrated report. The integrated reviews provide EPA and the public with a greater understanding of the challenges of a State NPDES program, and increases transparency through making PQR and SRF results publicly available on EPA's website.

SRF and Integrated CWA PQR Executive Summary

Introduction

State Review Framework (SRF) oversight reviews of the Washington Department of Ecology (Ecology), Puget Sound Clean Air Agency (PSCAA), and Southwest Clean Air Agency (SWCAA) were conducted in 2012 by EPA Region 10 (R-10) enforcement staff. In addition, the "2009 Regional NPDES Program Review for EPA Region 10"[1] report dated January 13, 2011, was reviewed by R-10 permitting and enforcement staff to determine any overlapping issues between permitting and enforcement.

The Clean Water Act National Pollutant Discharge Elimination System (CWA-NPDES) program was reviewed under both SRF and PQR. The Clean Air Act (CAA) Stationary Source and Resource Conservation and Recovery Act (RCRA) Subtitle C programs were reviewed only under SRF.

SRF findings are based on file metrics derived from file reviews, data metrics, and conversations with program staff. PQR findings are based on reviews of permits, fact sheets, and interviews.

Priority Issues to Address

The following are the top priority issues affecting program performance of the State and local air agencies:

- At the time of SRF on-site review, Ecology was not entering data into the EPA national data system for NPDES. Between the time of on-site review and this final report, Ecology continued to work with EPA Region 10 and EPA HQ to get Ecology's data system communicating and uploading data to ICIS-NPDES by March 2013, as previously agreed. This issue has, therefore, been largely addressed, but additional data needs are included below.
- Ecology did not meet inspection coverage consistent with the national goals for Treatment, Storage and Disposal Facilities (TSDFs) and did not complete a facility-wide inspection at the U.S. Department of Energy Hanford Facility (Hanford.) Ecology will ensure all dangerous waste management units, generator and satellite accumulation areas, and transportation practices at Hanford will be thoroughly inspected by the end of September 2015. Ecology's NWP, HWTR Program, and the Industrial Section of the Waste-2-Resources Program will coordinate so that the HWTR Inspector Guidance manual becomes the accepted standard guidance for conducting RCRA/Dangerous Waste Inspections in Washington.

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[1] U.S. Environmental Protection Agency, 2009 Regional NPDES Program Review for Region 10, January 31, 2011. *http://www.epa.gov/npdes/pubs/pqr_region_10_report.pdf*

CWA-NPDES Integrated Findings

Based on the 2012 SRF review and the 2009 PQR review, no overlapping issues affecting performance of both the permitting and enforcement programs were found.

Major PQR CWA-NPDES Findings

The 2009 Regional NPDES Program Review for EPA Region 10[2] identified ranked findings into three categories.

- Category 1—Most Significant: Proposed Action Items will address a current deficiency or noncompliance with a federal regulation.
- Category 2—Recommended: Proposed Action Items will address a current deficiency with EPA guidance or policy.
- Category 3—Suggested: Proposed Action Items are listed as recommendations to increase the effectiveness of the state's or Region's NPDES permit program.

The category 1 findings were in specific areas applicable only to certain permits types. The review identified major category 1 findings in Washington's NPDES permits in the following areas.

- Thermal Variances & Cooling Water Intake Structures (CWA §316(a) & 316(b))
- Sanitary Sewer Overflows
- Concentrated Animal Feeding Operations (CAFOs)
- Pretreatment Program

Washington has addressed or is in the process of addressing all category 1 findings. Region 10 is engaged in the review of the draft CAFO permit with anticipated reissuance in 2013.

Under the core review, reviewers found that Ecology had very good fact sheets and permits. The fact sheets are robust and do a good job of documenting the basis for the permits and permitting decisions. In addition, the permits reviewed appear to be generally consistent with core NPDES tenets. The quality of the fact sheets and permits appear, in part, to be a function of the state's good set of permitting tools, including templates, spreadsheets, policies, and permit writer's manual.

Some category 2 and 3 findings under the core review were that presentation of information documenting pollutants of concern and antidegradation were not always sufficient. Permit writers relied on standard template language without providing sufficient details as relates to the specific permit. Ecology has improved this documentation since the 2009 PQR review. Ecology regularly reviews, updates and improves the permit and fact sheet template language.

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[2] U.S. Environmental Protection Agency, 2009 Regional NPDES Program Review for Region 10, January 31, 2011. *http://www.epa.gov/npdes/pubs/pqr_region_10_report.pdf*

Major SRF CWA-NPDES Program Findings

- At the time of on-site review, Ecology was not entering data into the EPA national data system for NPDES. This was an ongoing issue from Round 1 of SRF. Ecology continued to work with EPA Region 10 and EPA HQ to get Ecology's data system communicating and uploading data to ICIS-NPDES by March 2013, as previously agreed. EPA will provide SEV training, and Ecology will then enter SEVs and SEV SNCs in their data system. Now that Ecology's database is linked to ICIS-NPDES, Ecology will utilize ICIS-NPDES to determine other SNCs.
- Of commendable note is the level of inspections conducted by Ecology in 2011. Ecology met or exceeded all CMS and PPA goals. The levels of construction and industrial stormwater inspections far exceeded Ecology's commitments to EPA.

Major SRF CAA Stationary Source Program Findings

- Ecology and SWCAA are not maintaining and accurately entering Minimum Data Requirements (MDRs) in the national data system. By November 1, 2013, Ecology and SWCAA shall each develop a plan for improving the integrity of MDR data entry into AFS.
- Ecology, PSCAA, and SWCAA are not entering MDRs into AFS in a timely manner (within 120 days of stack tests; within 60 days of other events). By November 1, 2013, each agency will conduct a workload analysis as needed and develop a plan to improve timely entry of data.
- Compliance status is not being updated for the majority of informal enforcement actions. This is an area for EPA-R10 improvement, and R10 submitted a plan to OECA by May 31, 2013, as previously agreed. The plan presents a timeline for the Region to enter R10 data for metric 7b1, communicate with States and LAAs regarding this data need, and provide training to States and LAAs for their data entry.
- PSCAA is taking appropriate but untimely enforcement actions to address HPVs. By November 1, 2013, PSCAA will conduct a workload analysis if needed and prepare a plan on how HPVs can be addressed in a timely manner.
- SWCAA's documentation of economic benefit consideration in penalties is inconsistent. By November 1, 2013, SWCAA shall incorporate an affirmative statement in all supporting documentation for penalty calculations that describes whether or not economic benefit was considered during the penalty assessment phase.
- Overall there was an appreciable improvement in FCE documentation since Round 1 of SRF so that compliance was more readily determined during this review.
- Inspection commitments were met or exceeded by all three agencies. PSCAA far exceeded their commitment for SM80 inspections.

Major SRF RCRA Subtitle C Program Findings

- Ecology did not meet inspection coverage consistent with the national goals for Treatment, Storage and Disposal Facilities (TSDFs) and did not complete a facility-wide inspection at the U.S. Department of Energy Hanford Facility (Hanford.) As part of the

Performance Partnership Agreement (PPA) and annual inspection planning processes, Ecology will ensure all dangerous waste management units, generator and satellite accumulation areas, and transportation practices at Hanford will be thoroughly inspected by the end of September 2015. Ecology's NWP, HWTR Program, and the Industrial Section of the Waste-2-Resources Program will coordinate so that the HWTR Inspector Guidance manual becomes the accepted standard guidance for conducting RCRA/Dangerous Waste Inspections in Washington. In addition, Ecology and EPA will continue the regularly scheduled quarterly meeting discussions of the status of inspection coverage and inspection findings throughout the State and will review inspection coverage annually in monitoring PPA implementation to confirm that inspection commitments have been met.

- There was a significant number of missing inspection reports, which created artificially higher compliance inspection counts than the files supported. In addition, Ecology did not meet the goal of the EPA and State enforcement response policy for completing inspection reports within 150 days. By December 31, 2013, Ecology will provide EPA with a plan to improve the timeliness of inspection report completion and to ensure all data entered for inspections are supported by the file documentation.
- There were discrepancies in the files for final penalty assessments and collections. Ecology will develop and present to EPA a plan by December 31, 2013, for better coordination between inspectors and enforcement officers to document penalty justifications, settlements and collections.
- An important improvement to recognize is the State effort to improve facility count data translation between the State database and RCRAInfo which were successful in creating realistic generator counts for 2011.

Major Follow-Up Actions

- Ecology continued to work with EPA Region 10 and EPA HQ to get Ecology's data system communicating and uploading data to ICIS-NPDES by March 2013, as previously agreed. EPA will provide SEV training, and Ecology will then enter SEVs and SEV SNCs into their data system. Now that Ecology's database is linked to ICIS-NPDES, Ecology will utilize ICIS-NPDES to determine other SNCs.
- By November 1, 2013, Ecology, PSCAA and SWCAA will each conduct a workload analysis as needed and prepare a plan on how data will be entered into AFS in a timely fashion and, for Ecology and SWCAA, with greater accuracy in order to meet national MDRs for AFS data entry.
- Per previous agreement, EPA-R10 submitted a plan to OECA by May 31, 2013, that presents a timeline for the Region to enter R10 data for metric 7b1, communicate with States and LAAs regarding this data need, and provide training to States and LAAs for their data entry.
- By November 1, 2013, PSCAA will conduct a workload analysis if needed and prepare a plan on how HPVs can be addressed in a timely manner.
- By November 1, 2013, SWCAA shall incorporate an affirmative statement in all supporting documentation for penalty calculations that describes whether or not economic benefit was considered during the penalty assessment phase.

- Ecology will work with EPA Region 10 on SFY 2014-2015 PPA and inspection plan commitments to improve RCRA inspection levels, in particular ensuring that all dangerous waste management units, generator and satellite accumulation areas, and transportation practices at Hanford will be thoroughly inspected by the end of September 2015.
- By December 31, 2013, Ecology will provide a plan to EPA Region 10 to improve RCRA inspection reports.
- Ecology will develop and present to EPA a plan by December 31, 2013, for better coordination between inspectors and enforcement officers to document RCRA penalty justifications, settlements and collections.

Recommendations and actions identified from the SRF review will be tracked in the SRF Tracker.

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CWA-NPDES Integrated SRF and PQR Review

I. Introduction

EPA reviews regional and State Clean Water Act National Pollutant Discharge Elimination System (NPDES) permitting and enforcement programs every four years. During these reviews, EPA staff review topics related to NPDES program implementation and enforcement. A primary component of these reviews is the State Review Framework (SRF), which evaluates 12 elements of State enforcement programs. Beginning in FY 2013, a second large component of each integrated NPDES review will be the Permit Quality Review (PQR), which assesses whether a State adequately implements the requirements of the NPDES program as reflected in the permit and other supporting documents (e.g., fact sheet, calculations). For this review initiated in FY 2012, however, EPA Region 10 utilized a "hybrid" approach in which a full SRF review was conducted but a past PQR report was used to determine common findings.

Through this review, EPA promotes national consistency, identifies successes in implementation of the base NPDES program, and identifies opportunities for improvement in the development of NPDES permits and enforcement. The findings of the review may be used by EPA headquarters to identify areas for training or guidance, and by the EPA region to help identify or assist States in determining action items to improve their NPDES programs.

EPA conducted an integrated oversight review of the State NPDES permitting and enforcement and compliance program by conducting a full SRF review during 2012 and reviewing the 2009 PQR (report date of January 13, 2011). The PQR was designed to assess how well the State implements the requirements of the NPDES program as reflected in NPDES permits and other supporting documents. The SRF review was designed to ensure a minimum baseline of consistent performance across States, and that EPA conducts oversight of State enforcement and compliance programs in a nationally consistent and efficient manner. The SRF review looks at 12 program elements covering data (completeness, timeliness, and quality); inspections (coverage and quality); identification of violations; enforcement actions (appropriateness and timeliness); and penalties (calculation, assessment, and collection).

The integrated review examined data and files generated and kept by the Washington Department of Ecology (Ecology). This section focuses only on the integrated PQR and Clean Water Act (CWA) SRF NPDES program findings.

The integrated review was conducted in three phases: analyzing information from the national data systems, reviewing a limited set of State files, and development of findings and recommendations. Considerable consultation was built into the process to ensure EPA and the State understand the causes of issues, and to seek agreement on identifying the actions needed to address issues.

The report is designed to capture the information and agreements developed during the review process in order to facilitate program improvements. The report is designed to provide factual information. EPA also uses the information from the integrated reviews to draw a "national

picture" of the NPDES program, to develop comparable State performance dashboards, and to identify any issues that require a national response.

II. Coordination Between Permitting and Enforcement

The Department of Ecology's Water Quality Program implements the CWA/NPDES program under the authority of the State's Water Pollution Control Act (Revised Washington Code, RCW 90.48) and the State's rules and regulations for the protection of water quality.

NPDES individual permits are primarily written by staff in the four regional offices and two field offices. NPDES general permits are primarily written by staff in the headquarters office. Enforcement staff are decentralized and located in each of the regional offices. Enforcement staff work directly with permit writers while permits are in the draft stage to ensure that permits and requirements are enforceable.

Permit writers work with enforcement staff over the life of permits to evaluate compliance and implement enforcement actions as needed. Permit writers meet with enforcement staff on a monthly basis to review DMR noncompliance and discuss appropriate actions. Ecology's permit database allows for the input of comments regarding incidence of noncompliance.

III. Integrated Review Background

Early in the review process, Region 10 permitting and enforcement staff reviewed the previous PQR report (http://cfpub1.epa.gov/npdes/pqr.cfm) for any relevance to SRF file selection. None was found. After the SRF findings were drafted, the PQR report was again reviewed for any relevance to the SRF findings. None was found.

IV. How Report Findings Are Made

The findings in this report were made by EPA Region 10's permitting and enforcement staff after reviewing the past PQR report and analyzing SRF-related data in the national data systems and reviewing facility files at the State. Permitting and enforcement staff consulted with each other before determining findings. Findings cover both positive and negative aspects of the State's performance. Where the State program was doing particularly well or was meeting all of its requirements, EPA identified these areas in the reports below. Where EPA found the State had opportunities to improve both permitting and enforcement, EPA suggested an appropriate course of action.

V. Common Findings

There was not direct overlap of issues identified in the 2012 SRF review with findings in the 2009 PQR review.

PQR-specific findings follow in the PQR portion of this report. SRF-specific findings are described in the NPDES portion of the SRF report following the PQR information.

CWA-NPDES Permit Quality Review

I. PQR Background

National Pollutant Discharge Elimination System (NPDES) Permit Quality Reviews (PQRs) are an evaluation of a select set of NPDES permits to determine whether permits are developed in a manner consistent with applicable requirements established in the Clean Water Act (CWA) and NPDES regulations. Through this review mechanism, EPA promotes national consistency, identifies successes in implementation of the NPDES program as well as opportunities for improvement in the development of NPDES permits.

For this hybrid PQR, EPA reviewed the 2009 Regional NPDES Program Review for EPA Region 10[3] dated January 13, 2011. EPA Region 10 oversees the NPDES Program for Washington. Washington is not authorized to administer the NPDES program for federal facilities and is not authorized to administer the Biosolids program.

The PQRs were performed primarily during the fourth quarter of FY2008 and the first quarter of FY2009. WPD staff collected NPDES program information and permits from Regional and state staff, and a detailed PQR was performed for Washington in September 2008.

Topic-specific reviews target components or types of permits. The scope of a topic-specific review is determined in consultation with states on a case-by-case basis. Region 10 topic-specific reviews focused on the following areas:

1. mercury methods/limits,
2. discharges to impaired waters,
3. TMDL implementation,
4. use of Escherichia coli and enterococcus standards,
5. antidegradation and use of mixing zones,
6. implementation of CWA section 316(a) and (b),
7. stormwater permitting,
8. implementation of Long-Term Control Plans (LTCPs) for combined sewer overflows (CSOs), SSOs,
9. implementation of CAFO requirements,
10. implementation of WET, and
11. pretreatment.

The core permit review process involves evaluating selected permits and support materials using basic NPDES program criteria. Reviewers complete the core review by examining selected permits and supporting documentation, assessing those materials using basic PQR tools, and talking with permit writers regarding technical questions related to the permit development process. The primary tools used during the permit reviews were (1) Central Tenets of Permitting

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[3] U.S. Environmental Protection Agency, 2009 Regional NPDES Program Review for Region 10, January 31, 2011. *http://www.epa.gov/npdes/pubs/pqr_region_10_report.pdf*

(developed during the 2000/2001 PQR); and (2) Core Review Checklists (developed during the 2000/2001 PQR and revised in 2008). Material reviewed as part of the Region 10 core review include NPDES permits, state water quality standards (WQS) (including mixing zone provisions, bacteria standards, mercury standards and methods, and reasonable potential [RP] procedures), and various state permitting policy and guidance documents. In addition, discussions with Region 10 and state staff members addressed a range of topics including program status, the permitting process, relative responsibilities, organization, and staffing.

The majority of the permits were chosen randomly from a list of permits issued after January 1, 2004, to ensure a review of recently issued permits. The remaining permits were selected on the basis of discussions with state and Region 10 staff, with an effort to primarily include major facilities, with an equal distribution of industrial and municipal permits. Ten core permits were reviewed from Washington.

II. State Permitting Program Overview

A. Program Structure

The Washington Department of Ecology (Ecology) administers the NPDES program in Washington. Ecology has four regional offices (Northwest, Southwest, Central, and Eastern) and two field offices (Bellingham and Vancouver). In addition, Ecology has an Industrial Section, which is part of the state's Waste 2 Resources Program and develops industrial NPDES permits for certain industrial sectors (e.g., pulp and paper, oil refining, and aluminum smelting). The Industrial Section conducts multi-media activities and issues air operating and hazardous waste permits in addition to NPDES permits. Approximately 95 percent of the water quality program is administered via the four regional offices. The state also has an Energy Facility Site Evaluation Council (EFSEC) that addresses certain aspects of energy facility operation, including the development of some NPDES permits.

Summary data from the state's Water Quality Permit Life Cycle System (WPLCS) indicate that Ecology issues NPDES permits to a total of 6,650 facilities. In addition to 325 municipal permits and 464 industrial permits, Ecology has general permits that address aquatic pesticides, boatyards, CAFOs, fresh fruit packing, sand and gravel, stormwater, fish hatching and rearing, and water treatment plants. General permits are mostly issued by headquarters; however, permits that require regional expertise are issued by regional offices (e.g., Fish – Northwest; Fruit Packer – Central). Headquarters works on those general permits in an advisory role. Individual permits are typically developed and issued by the relevant regional office. The section head in each regional office signs off on the permits issued out of each office. The Industrial Section develops all aspects of industrial permits, including conducting monitoring and enforcement activities. Each regional office includes a compliance/enforcement staff.

It the time of the 2009 PQR, Ecology used a permit database system called the Water Permitting Life Cycle System (WPLCS). Ecology developed a new and more flexible database to manage permit information and to track compliance called Water Quality Permitting and Reporting Information System, (PARIS). PARIS replaced WPLCS on April 19, 2010. Ecology resumed the batch upload of data from PARIS to the Integrated Compliance Information System (ICIS) in

early 2013.

Permitting assignments can vary by region. The Southwest and Northwest regions are large offices. In those offices, separate units address municipal and industrial permits. The smaller offices have a technical/permit unit and watershed/TMDL unit. Overall, the permitting program is organized geographically so that the permit managers can become familiar with local water quality issues and specific facilities. Permits are generally assigned based on familiarity, expertise, and workload.

The state's individual permit backlog at the time of the review was about 25 percent. Ecology is working to reduce the backlog to 10 percent. Some regions have met the 10 percent target. For example, the Northwest region has no backlog for major permits, and a 13 percent backlog for minor permits.

Ecology has developed numerous high-quality permitting tools to support permit development and implementation. The tools include permit and fact sheet templates, various spreadsheets (including criteria spreadsheets and limit calculation spreadsheets), and tools addressing ammonia, temperature, dissolved oxygen (DO) (model), and dilution (RIVPLUME). In addition, the state has developed an extensive permit writer's manual that describes when and how to use the tools (available on the Ecology website at http://www.ecy.wa.gov/programs/eap/pwspread/pwspread.html). Typically, the permit writer/manager uses the tools to develop the permit. In some cases, additional tools and support are used in the permit development process.

Ecology headquarters has designated a senior person to perform statewide permit Quality Assurance/Quality Control. In addition, regional workgroups discuss permitting issues, and a policy group at headquarters creates permit templates. Headquarters also provides advisory resources to permit writers.

Ecology sends a reminder to each facility one year in advance of permit renewal. The permit coordinator logs materials received (and any contacts) and checks signatures, and such. In many cases, the application can go directly to the permit manager. Correspondence from permitted facilities generally goes to the permit manager. When an application is complete, Ecology sends a letter back to the facility. The permit manager then drafts the permit and fact sheet.

The permit writer develops technology-based limits and water-quality based limits if the latter are more stringent. If the permitting situation is more complex, the permit writer can obtain support from the Environmental Assessment Program. Ecology establishes schedule goals in its performance plan, although those can change because of external factors. In general, it takes 7 months to complete the permit development process. Ecology uses a work plan to monitor progress.

Ecology will use available water quality data from the closest monitoring stations, and permits might require monitoring to obtain needed data. From time to time, the state has had initiatives to collect specific types of water quality data. For example, about 10 years ago, the state collected a lot of metals data. Ecology is interested in temperature data. Washington State has sediment

criteria in its state regulations (for the Puget Sound). The state is working to develop an RP process for sediment.

The Environmental Assessment Program develops TMDLs and does water quality modeling. Some of those staff members are in the regional offices. Permit managers coordinate with the Environmental Assessment Program staff and regional TMDL leads to determine if a TMDL (i.e., wasteload allocation) is applicable to a permit and to implement any such TMDL. In small regions, awareness regarding TMDLs is high. Ecology has not assessed how well this permitting-TMDL coordination works. Water Quality Assessment search and mapping tools assist permit writers' in determining the 303(d) and TMDL status of waterbodies. The TMDL search tool is available at http://apps.ecy.wa.gov/wats/Default.aspx.

Ecology has developed a matrix of monitoring requirements for municipal permits. No matrix has been developed for industrial facilities because the requirements vary too much. The state's permit writer's manual also provides monitoring guidance available at https://fortress.wa.gov/ecy/publications/publications/92109.pdf. Special conditions are included in the permit templates. Permit managers are directed to use the most recent permit and fact sheet templates to ensure that the most up-to-date conditions are included in each new permit. Ecology used a SharePoint site to provide a central resource for permit templates and other permit writing tools.

State WQS are in 173-201A WAC available at http://www.ecy.wa.gov/programs/wq/swqs/index.html.

B. Universe and Permit Issuance

Since the 2009 PQR, Ecology implemented a new water quality permit database system called Permitting and Reporting Information System (PARIS) on April 19, 2010. A public version of PARIS is available via the internet at http://www.ecy.wa.gov/programs/wq/permits/paris/paris.html. PARIS contains information on water quality permits, inspections, enforcement actions, and discharge monitoring data. Both NPDES and State Waste Discharge permits are included in the database.

The public version of PARIS was queried to provide an update summary of Ecology's NPDES permit universe as of February 25, 2013. The following tables provide a summary of individual and general NPDES permits.

Table 1. Washington NPDES Permits, February 25, 2013 (source: PARIS database)

All Permits

Count of NPDES Permits by Permit Number

	CRO	ERO	Hanford	HQ	Industrial	NWRO	SWRO	Grand Total
AP Aquatic Plant and Algae Management GP		1				1		2
Boatyard GP						48	18	66
CAFO GP	3	4				4	2	13
Construction SW GP				1900				1900
Fruit Packer GP	154	18						172
Industrial NPDES IP	22	10		2	27	56	70	187
Industrial SW GP				1140				1140
Municipal NPDES IP	44	43				67	79	233
Municipal SW Phase I GP				14				14
Municipal SW Phase II Eastern WA GP	1	1		30				32
Municipal SW Phase II Western WA GP				113				113
Net Pens NDPES IP						7	1	8
Sand and Gravel GP	180	156	2			290	313	941
Upland Fish Hatchery GP	13	11				14	41	79
Water Treatment Plant GP	2	2				9	19	32
WSDOT Municipal SW GP				1				1
Grand Total	**419**	**246**	**2**	**3200**	**27**	**496**	**543**	**4933**

Individual NPDES Permits Only

Count of NPDES Permits by Permit Number

	CRO	ERO	HQ	Industrial	NWRO	SWRO	Grand Total
Industrial NPDES IP	22	10	2	27	56	70	187
Municipal NPDES IP	44	43			67	79	233
Net Pens NDPES IP					7	1	8
Grand Total	**66**	**53**	**2**	**27**	**130**	**150**	**428**

General NDPES Permits Only

Count of NPDES Permits by Permit Number

	CRO	ERO	Hanford	HQ	NWRO	SWRO	Grand Total
AP Aquatic Plant and Algae Management GP		1			1		2
Boatyard GP					48	18	66
CAFO GP	3	4			4	2	13
Construction SW GP				1900			1900
Fruit Packer GP	154	18					172
Industrial SW GP				1140			1140
Municipal SW Phase I GP				14			14
Municipal SW Phase II Eastern WA GP	1	1		30			32
Municipal SW Phase II Western WA GP				113			113
Sand and Gravel GP	180	156	2		290	313	941
Upland Fish Hatchery GP	13	11			14	41	79
Water Treatment Plant GP	2	2			9	19	32
WSDOT Municipal SW GP				1			1
Grand Total	**353**	**193**	**2**	**3198**	**366**	**393**	**4505**

Additionally, Ecology administers 351 State Waste Discharge (SWD) Permits authorizing discharges to groundwater, to POTWs and for reclaimed water.

At the time of the 2009 PQR, the permit backlog was estimated to be 25 percent. Based on the data above, the permit backlog for NPDES permits is 32 percent. The backlog for individual SWD permits is 22 percent. Ecology instituted the necessary database changes to allow for the uploading of data to EPA's ICIS system. The data uploads began in January 2013.

The permit issuance process begins six to twelve months before the application is due to Ecology. Permittees are notified by letter when their application has been received. Applications are then pass on to a permit writer for review. If the application is deemed complete, then the permittee is notified by letter. If the application is incomplete, the permit writer works with the permittee to ensure that a complete application is received before drafting of the permit begins. Permit writers often have regular communications with the permittee during the drafting of the permit to ensure that up-to-date and accurate information is used to draft the permit.

Once a permit and a fact sheet are drafted, the drafts are provided to the permittee for a fact check. That is an informal process that can take from 2 weeks to 30 days. Any feedback goes into the permit file and can result in a change to the permit or fact sheet. Following entity review, the public and Region 10 (for major permits) have an opportunity to review the permit. The Region has 30 days for general comments and 90 days for detailed comments (per a 1989 memorandum of agreement). Ecology posts the draft permit and fact sheet in the PARIS database. Comments are accepted via mail or e-mail. Notice of each permit in local newspapers is required for all permits. Ecology's response to comment is generally attached to the fact sheet (the fact sheet can be modified if relevant information changes). Public hearings are held for all general permits. Public hearings for individual permits are based on the degree of public interest, which is determined on a case-by-case basis; such hearings do not occur frequently. Permit appeals are heard by the Pollution Control Hearings Board (PCHB). All recent stormwater general permits have been appealed. The number of appeals of individual permits fluctuates. More industrial permits are appealed than municipal permits. Usually environmental groups seek to appeal those permits. The administrative record for each permit is kept in the regional offices.

C. State-Specific Challenges

The 2009 Report noted challenges related to the NPDES data management system. Ecology's Water Quality Program used the WPLCS database to manage permit information and to track compliance. In 2010, Ecology launched a new database system named the Permitting and Reporting Information System, or PARIS. The system is flexible and comprehensive. It allows for electronic DMR submittal, which Ecology is encouraging for all permittees. For more information about WQWebDMR refer to http://www.ecy.wa.gov/programs/wq/permits/paris/webdmr.html.

D. Current State Initiatives

One of Ecology primary initiatives at this time is protecting Puget Sound. Both region 10 and Ecology are implementing projects related to the reducing pollution to Puget Sound. Puget Sound continues to be a priority permitting area.

III. Core Review Findings

The core review was based on an examination of 13 Washington NPDES permits (six from the Northwest office, four from the Southwest office, one from the Central office, and two from the Eastern office). Overall, permit quality appears to be good. Significant findings regarding the permits are discussed below.

High-Quality Permits and Fact Sheets: In general, Ecology has very good fact sheets and permits. The fact sheets are robust and do a good job of documenting the basis for the permits and permitting decisions. In addition, the permits reviewed appear to be generally consistent with core NPDES tenets. The quality of the fact sheets and permits appear, in part, to be a function of the state's good set of permitting tools, including templates, spreadsheets, policies, and permit writer's manual.

Backlog: At the time of the review, Ecology's backlog was approximately 25 percent for both major permits and minor permits. Ecology is working to reduce the backlog to 10 percent, and some regions have met the 10 percent target.

Documentation of Permit Basis: Ecology fact sheet templates are well constructed; however, certain aspects could be strengthened. First, the fact sheets reviewed do not include a clear discussion of which pollutants were evaluated and why. Such a discussion documents that all appropriate pollutants were considered and evaluated where appropriate. Second, the fact sheets reviewed included boilerplate language regarding antidegradation. Although this was not identified as an issue in the permits reviewed, Ecology should be clear regarding when antidegradation provisions apply and what is required to meet those requirements (and permit documentation should address these requirements as applicable). Ecology has developed a detailed antidegradation procedure, which is not reflected in the reviewed permits. Third, there is not a standard heading for antibacksliding in the fact sheets. As a result, it was not always clear whether a change in permit limits triggered antibacksliding provisions and whether such requirements were met. Finally, the fact sheets do not typically document receiving water quality (i.e., whether receiving waters are impaired).

File Documentation: Although permit file documentation is generally good, in some cases, items expected to be in the permit files were not identified in the relevant files (e.g., permit applications, fact sheets). In addition, the calculations for limits are not always in the permit files. It appears that actual calculations are often kept in digital format and are not routinely referenced in the permit file. When calculations are included in the fact sheet, they generally do not include the calculations in the original spreadsheets. Note that the Bellevue/Northwest office maintains hard copy and digital files.

Issue Raised by Ecology for EPA consideration: Ecology staff indicated that a senior EPA modeling expert is retiring and expressed concern regarding continued modeling support for Visual Plume software. Ecology desires continued support. The only known alternative is Cormix, which is expensive and presents some operating system issues.

IV. Special Focus Area Findings

The 2009 Report included the following special focus areas reviews:

A. Mercury Methods
B. Impaired Waters
C. Total Maximum Daily Loads (TMDLs)
D. Use of E. coli and Enterococcus Bacteria Standard
E. Antidegradation and Mixing Zones
F. Thermal Variances & Cooling Water Intake Structures (CWA §316(a) & (b))
G. Stormwater
H. Combined Sewer Overflows (CSOs)
I. Sanitary Sewer Overflows (SSOs) & Peak Flows
J. Concentrated Animal Feeding Operations
K. Whole Effluent Toxicity (WET)
L. National Pretreatment Program

A. Mercury Methods

EPA's regulations require that measurements included on NPDES permit applications and on reports required to be submitted under the permit generally be made using analytical methods approved by EPA under 40 CFR Part 136. See 40 CFR 122.21(g)(7), 122.41(j), 136.1, 136.3, and 136.6. Four analytical methods for mercury in wastewater have been approved for use under 40 CFR Part 136: Method 245.1, Method 245.2, Method 245.7, and Method 1631E. Methods 245.1 and 245.2, approved by EPA in 1974, can achieve measurement of mercury to 200 ng/L. Method 245.7, approved March 12, 2007, has a quantitation level of 5.0 ng/L. EPA also approved Method 1631 Revision E in 2002, with a quantitation level of 0.5 ng/L. The sensitivity of Methods 245.1 and 245.2 are well above most state mercury water quality criteria adopted for the protection of aquatic life and human health, which generally fall in the range of 1 to 50 ng/L. In contrast, Methods 245.7 and 1631E do support the measurement of mercury at such low levels.

An August 23, 2007, memorandum from James A. Hanlon to the Regional EPA Water Division Directors clarifies and explains that, in light of existing regulatory requirements for NPDES permits, only the most sensitive methods, such as Methods 1631E and 245.7, are appropriate in most instances for use in deciding whether to set a permit limitation for mercury and for sampling and analysis of mercury pursuant to the monitoring requirements within a permit. See Analytical Methods for Mercury in National Pollutant Discharge Elimination System (NPDES) Permits, which is available at http://www.epa.gov/npdes/pubs/mercurymemo_analyticalmethods.pdf.

This portion of the review looked at the analytical methods or quantitation levels specified for monitoring requirements in permits following promulgation of the more sensitive methods and

whether permits provide consideration of method quantitation levels for analytical methods approved by EPA under 40 CFR Part 136.

Ecology staff members indicated that they have recently added an appendix to all permits that provides for the use of Method 1631E. In addition, the state conducted a special project (not using NPDES permits) involving winter and summer sampling for mercury. Although voluntary compliance resulted in a 50 percent rate of response, the mercury sampling indicated that municipal facilities were below water quality criteria and that industrial facilities were quite varied, with some having high levels of mercury.

Findings
Two Washington permits were selected from PCS because it appeared that they address mercury. Both permits were issued after promulgation of Method 1631E (signed September 27, 2007, and December 30, 2003, respectively). The permit for the Buckhorn Mountain Mine (WA0052434) includes limits for total recoverable mercury and requires that monitoring comply with the latest revision of 40 CFR Part 136. The fact sheet explains the basis for the mercury limits but does not discuss analytical methods for mercury. Ecology has recently added to its permit template a list of conventional, nonconventional, and priority pollutants with required test methods and detection levels. The list includes Method 1631E for mercury.

The second permit, Army Defense (WA0021954) does not include limits for mercury but does require monitoring for mercury. The permit requires that monitoring comply with 40 CFR Part 136, unless an alternative method was approved. The fact sheet does not discuss mercury limits or analytical methods.

In 2010, Ecology required wastewater treatment plant greater than a design capacity of 1.0 mgd to sample for mercury using clean sampling techniques and method 1631E. The current permit (2013) template required the use of method 1631E for priority pollutant testing.

B. Impaired Waters

Section 303(d) of the CWA requires states to identify and establish a priority ranking for waters not attaining WQS despite implementation of technology-based requirements (impaired waters). For those priority waters, the states must establish TMDLs for pollutants causing impairments. The focus of the impaired waters review was to verify that permits and fact sheets acknowledge the §303(d) status of receiving waters and to verify that impairing pollutants are being addressed in NPDES permits before TMDLs are completed. With regard to the findings below, note that in some cases a facility might discharge to a water segment that is impaired but may not discharge a pollutant of concern. Additionally, it is possible that such an impairment was considered but that documentation was not included in the fact sheet.

In Washington, if a facility is not causing water quality impairment, the discharge is allowed until a TMDL is developed. Washington's antidegradation policy provides in part that no degradation is allowed that would interfere with, or become injurious to, existing or designated uses.

Findings
Washington's Yakima Sewage Treatment Plant (WA0024023) discharges to the Yakima River at

River Mile 110.1. The permit was issued June 2, 2006, and expires June 30, 2011. The fact sheet indicates that the Lower Yakima River (segments downstream of the Yakima facility) is listed as water quality-impaired for DO on the current §303(d) list. Ecology used the Streeter-Phelps model as a screening tool to evaluate the need for WQBELs for the previous draft permit. However, it was not able to determine RP for the Yakima Sewage Treatment Plant effluent to cause or contribute to the DO impairment due to multiple point and nonpoint sources that also contribute to the DO problem in the area. The state had already identified the need for a DO TMDL to determine point source WLA and nonpoint load allocations before the issuance of the permit. The permit includes technology-based effluent limits in the permit that Ecology believes will prohibit the facility from further impairment of the Yakima River.

The second Washington permit reviewed was for the city of Vancouver WWTP (WA0024350), which discharges to the Columbia River. The permit reviewed was a draft copy, and the date of issuance and expiration were unavailable at the time of review. The facility discharges to the Columbia River, river mile 105, which has a special temperature standard of 20 °C. Washington, Oregon, and Idaho have listed most of the Columbia and Snake rivers as impaired for temperature and total dissolved gases (TDG) on their state §303(d) lists. Washington State included on its 2004 §303(d) list the segment of the Columbia adjacent to Vancouver as impaired for temperature. Because of the multijurisdictional nature of the impairment, Washington is working with Oregon, Idaho, EPA, and Columbia Basin Indian Tribes to develop TMDLs for temperature and TDG on the Columbia and Snake rivers. It will likely be several years before final WLAs are available. The impact of the discharge on the temperature of the receiving water was modeled by simple mixing analysis at critical conditions (when the receiving water is at the temperature criterion –20 °C). The maximum daily temperature reported on the permit application was 27 °C. The predicted resultant temperature at the boundary of the chronic mixing zone is 20.2 °C (39:1 mixing zone ratio) and the incremental rise is 0.18 °C. The permit requires the permittee to determine if there are any cost-effective alternatives to discharging the thermal loading to the river.

The third Washington permit reviewed was for the city of Shelton WWTP (WA0023345), which discharges to the Hammersley Inlet, off Eagle Point, in South Puget Sound. The permit was issued March 14, 2008, and expires March 13, 2013. The fact sheet states that existing records were reviewed and it was determined that ambient water quality is mostly better than the designated classification criteria. The one exception is fecal coliform, which has caused both Hammersley Inlet and Oakland Bay to be listed on the §303(d) list of impaired and threatened waterbodies. Hammersley Inlet is listed on the §303(d) list for samples taken near the mouth of Gosnell Creek. Oakland Bay is listed for samples taken at various locations for fecal coliform, and has been listed in the past for DO and temperature. Investigations to determine the sources of the contamination state that discharges from the wastewater plant were not contributing to the problem. However, it is believed that overflows from the collection system are an occasional contributing source of contamination to the inner harbor area of Oakland Bay. Discharge limitations are included in the reviewed permit for the following parameters: biological oxygen demand (BOD), total suspended solids (TSS), fecal coliform bacteria, pH, and total residual chlorine.

C. Total Maximum Daily Loads (TMDLs)

A TMDL is a calculation of the maximum quantity of a given pollutant that may be added to a waterbody from all sources without exceeding its applicable WQS. States must establish TMDLs for all impairing pollutants - those pollutants that prevent waters from attaining WQS after implementing applicable technology-based requirements. Where a TMDL has been established for a waterbody, WQBELs should be consistent with the assumptions and requirements of any WLA for the discharge and approved by EPA.

Findings

The city of Snoqualmie WWTP (WA0022403) discharges to the Snoqualmie River from October through June each year. During the summer months (July to September), the facility produces Class A reclaimed water that is distributed to Snoqualmie Ridge for irrigation. The permit reviewed was issued June 18, 2008, and expires on June 18, 2013. Ecology released in 1994 the Snoqualmie River Total Maximum Daily Load Study[4] and concluded that the river did not meet WQS for ammonia-nitrogen, fecal coliform, and BOD. The TMDL established WLAs for summertime (August through October) discharges from the Snoqualmie WWTP. The permit imposes technology-based and seasonal TMDL-based limits on BOD, TSS, fecal coliform bacteria, and pH. The permit also includes seasonal TMDL-based limits on total ammonia (as NH_3-N), along with specific requirements related to reclaimed water production.

The second Washington permit reviewed for TMDL implementation was for the city of Chewelah WWTP (WA0023604), which discharges to the Colville River. This permit was issued April 4, 2006, and expires April 30, 2011. A TMDL for DO was developed in 2003. The permit included limitations for BOD, temperature, pH, DO, chlorine, ammonia, and fecal coliform. The final limits for the treatment plant are based on information received in the application, information contained in the approved facility plan, the Colville River Water Quality Study,[5] and the Colville River Dissolved Oxygen Total Maximum Daily Load Report.[6] The permit limits have been divided into two seasons, rather than three as in the previous permit, to simplify the documentation. The BOD limits in the summer low-flow season will be set at the more restrictive numbers listed in the 1997 Colville River Dissolved Oxygen TMDL.

D. Use of E. coli and Enterococcus Bacteria Standard

In its 1986 Ambient Water Quality Criteria for Bacteria document, EPA determined that E. coli and enterococcus are the most reliable indicators of bacteria in surface waters and recommended that these two indicators serve as the basis for bacterial WQS. E. coli is recommended as an indicator criterion for fresh waters, and enterococci is recommended as an indicator criterion for fresh waters and marine waters.

The EPA-recommended recreational WQS for E. coli is based on two criteria: (1) a geometric mean of 126 organisms/100 mL based on several samples collected during dry weather conditions; or (2) a single sample maximum based on designated use (e.g., 235 organisms/100

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[4] Publication No. 94-71, J. Joy, May 1994.
[5] Washington Department of Ecology 1997.
[6] Washington Department of Ecology 2003.

mL for designated beach).[7] The EPA-recommended recreational WQS for enterococci also is based on two criteria: (1) a geometric mean of 33 organisms/100 mL (fresh water) or 35 organisms/100 mL (marine waters) and (2) a single sample maximum based on designated use. EPA published approved test methods for E. coli and enterococci in wastewater on March 26, 2007 (72 FR 14220), which were added to 40 CFR Part 136.

Washington's WQS include standards for fecal coliform in freshwater and marine water shellfish harvesting waters (WAC 173-201A-200 and 210). These standards appear to be as stringent as EPA's fecal coliform criteria (1976). Ecology implements the Beaches Environmental Assessment and Coastal Health (BEACH) program, which monitors beaches for enterococcus levels. The program uses recommended thresholds to issue advisories and warnings and to close beaches on the basis of beach water quality. The state beach thresholds track the federal enterococci criteria for designated beach (single sample 104/100 mL) and light use full body contact (276/100 mL). The thresholds also incorporate fecal coliform levels that are consistent with the 1976 federal criteria. Washington is not subject to 40 CFR 131.41 bacteriological criteria for those states not complying with §303(i)(1)(A).

Findings
All the permits reviewed include pathogen limits that reflect state WQS. Washington has its own beach water quality monitoring program to address recreational waters.

Two Washington permits were reviewed. The first was for the city of Port Angeles WWTP (WA0023973), and the second was for the Seattle City Light/Diablo Dam WWTP (WA0029858). The Port Angeles permit includes fecal coliform limits that are consistent with the state's WQS. Similarly, the Seattle City Light WWTP permit includes limits for fecal coliform that are more stringent than the state's WQS. The respective fact sheets explain the basis for the fecal coliform limits.

E. Antidegradation and Mixing Zones

Washington's antidegradation regulations are at WAC 173-201A-300 to 410. Those regulations appear to be similar to federal criteria and specifically address several key concepts pertaining to implementation (e.g., define measureable change in water quality).

Washington's mixing zone regulations are at WAC 173-201A-400. Washington also addressed mixing zones in detail in the state's permit writers' guidance.

Findings
The implementation of antidegradation policy was reviewed as part of the core review. Consideration of antidegradation was not always documented in the fact sheets, and, in those cases where it was addressed, boilerplate or standard language was often used. In the Oregon permits, additional antidegradation discussions should be in NPDES permit fact sheets. In Washington, the fact sheets reviewed typically include boilerplate language regarding antidegradation. Ecology has developed a detailed antidegradation procedure. Ideally, fact sheets would indicate when antidegradation provisions apply and, if applicable, how a permit meets

[7] *Ambient Water Quality Criteria for Bacteria – 1986*, 440/5-84-002, U.S. EPA, January 1986.

those requirements; permit documentation should support that discussion as needed.

With regard to mixing zones, Washington typically provides basic information regarding whether and how mixing zones were used in developing WQBELs. The permits rely on the relevant state mixing zone regulations, however, the fact sheets tend to include limited information regarding the state mixing zone policy and the nature of and basis for a mixing zone in each permit.

F. Thermal Variances & Cooling Water Intake Structures (CWA §316(a) & (b))

Clean Water Act Section 316(a) addresses thermal variances from effluent limitations and §316(b) addresses impacts from cooling water intake structures. The goal of this permit review was to identify how the permitting authority incorporated §316 provisions into permit requirements.

The universe of potential NPDES permits for review was determined using EPA's PCS database and the lists of facilities developed during the rulemaking for the §316(b) Phase II and Phase III rules. EPA selected 3 in Washington.

As a result of litigation, on July 9, 2007 (72 FR 37107), EPA suspended the bulk of the Phase II §316(b) regulation and announced that, pending further rulemaking (ongoing), permit requirements for cooling water intake structures at Phase II facilities should be established on a case-by-case, BPJ basis [see 40 CFR 125.90(b)]. In addition, facilities with cooling water intake structures not subject to a national regulation under §316(b) (e.g., manufacturing facilities) must also include permit requirements on a case-by-case, BPJ basis [40 CFR 401.14 and 125.90(b)].

Findings

Three facilities from Washington were reviewed: Kettle Falls Generating Station (WA0045217), Longview Fibre Paper and Packaging (WA0000078), and Noveon Kalama (WA0000281). Kettle Falls uses closed-cycle cooling that is supplied by municipal sources; its NPDES permit contains requirements for only process wastewater (including cooling tower blowdown).

§316(a): The permits for Kettle Falls and Noveon contain temperature limits and use a mixing zone to meet thermal limits. The Longview permit, however, does not contain temperature limits and notes that a TMDL for temperature is under development in the vicinity of the facility.

§316(b): Permits for Longview and Noveon indicate that the facilities use cooling water intake structures withdrawing from surface water, but §316(b) permit conditions are missing.

G. Stormwater

The NPDES program requires stormwater discharges from certain MS4s, industrial activities, and construction sites to be permitted. Generally, EPA and NPDES-authorized states issue individual permits for medium and large MS4s and general permits for smaller MS4s, industrial activities, and construction activities.

Construction Permits

Washington's CGP that expired in late 2010 was not reviewed as part of the regional review.

Washington is to be commended for its advanced construction program, which includes a number of exceptional features and a wide variety of guidance available for site operators to improve compliance. For example, Washington requires each site one acre or larger to perform weekly sampling of its discharges to monitor turbidity and pH levels and compare those against benchmark values. Operators are required to notify the state when turbidity levels exceed a set benchmark. Also, Washington has developed procedures for the approval of active treatment systems to ensure that operators know and certify to proper procedures for the use of chemical flocculent to treat construction site waste. Each site proposing to use the materials must submit a request and obtain approval to use them. In addition, Washington requires sites to have certified inspectors to perform on-site inspections.

Industrial Permits
Washington reissued its industrial stormwater general permit for less than one year to provide additional time for the state to work with an external advisory committee to develop a new general permit. The subject permit expired in April 2009, but was the current permit at the time of the review. This (and previous) Washington industrial general permit is unique in that the state identifies each existing discharger covered under the permit that discharges to impaired waters and waters with TMDLs and established specific monitoring requirements on the basis of those determinations. The data are used to ensure that the facility is not contributing to the impairment.

Municipal Stormwater
Washington has one of the largest stormwater permitting staffs of any state in the country and has done a very good job developing permits and procedures to minimize the impacts of stormwater on water quality.

Washington issues three MS4 permits: one general permit for Phase I MS4s and two general permits for Phase II MS4s (one for Western and one for Eastern Washington). The Phase II permits establish detailed requirements applicable to each MS4 and include specific timeframes for when MS4s are expected to develop and implement the different aspects of the permits. An important feature of the Washington MS4 permits are the annual report requirements, which require permittees to clearly identify the status of development and implementation of activities required in the permit. That approach provides the state with a relatively easy way to gauge overall MS4 compliance with permit conditions. Each of the permits contains detailed appendices on minimum technical requirements for stormwater management at new development and redevelopment sites. The permits also include appendices that include additional requirements as necessary to address any applicable TMDL WLAs within the MS4 areas.

At present, Ecology has reissued all stormwater general permits, and the permits are current.

- Construction Stormwater General Permit (effective 1/1/2011)
- Industrial Stormwater General Permit (effective 7/1/2012)
- Municipal Stormwater Permits (Phase I and II) (effective 9/1/2012 and 8/1/2012)
- Sand and Gravel General Permit (effective 10/1/2011)

H. Combined Sewer Overflows (CSOs)

EPA's OW, Office of Enforcement Compliance Assurance (OECA) and EPA Regions worked together to revise the FY2007 Water Safe for Swimming (SS) Government Performance and Results Act measure for FY2008. The FY2008 measure incorporates a revised baseline to account for 59 CSO communities that are not required to develop LTCPs. The resulting measure also ensures that reporting is consistent across all EPA Regions. OW and OECA have provided guidelines describing the various elements of the new SS measure for a better understanding of the measure itself. The revised SS measure is as follows:
Number and national percent, using a constant denominator, of CSO permits with a schedule incorporated into an appropriate enforceable mechanism, including a permit or enforcement order, with specific dates and milestones, including a completion date consistent with Agency guidance, which requires one of the following:

- Implementation of a LTCP which will result in compliance with the technology and water quality-based requirements of the CWA
- Implementation of any other acceptable CSO control measures consistent with the 1994 CSO Control Policy
- Completion of separation after the baseline date

Region 10 Water Safe for Swimming (SS) Measure
As of August 2008, Region 10 had a total of 15 CSO permits (1 in Alaska, 3 in Oregon, and 11 in Washington), with a total of 288 outfalls. The Region has supported Washington's CSO program, which is a very mature program and is one of the best-organized CSO programs in the nation.

The major requirements of the Washington State regulation WAC 173-245 include the submission of plans and reports for the construction and operation of CSO reduction facilities. Some important regulation details are as follows:

Submission of a CSO Reduction Plan for approval by January 1, 1988.

Requirements of the CSO Reduction Plan include

1. Subsequent submission and approval of facility plans for major CSO Reduction Projects.
2. Annual CSO Reports that include details of the past year's frequency of discharge and volume at each CSO site, explain previous years' CSO reduction accomplishments, and list projects planned for the next year.
3. A CSO Reduction Plan Amendment, submitted with the application for permit renewal, that includes an assessment of the effectiveness of the CSO reduction plan to date, a reevaluation of the CSO sites' project priority ranking, and a list of projects to be accomplished in the next five years, based upon priorities and estimated revenues.
4. Incorporation of the CSO schedule into an administrative order or the applicable NPDES permit. At present, all compliance schedules have been put in the NPDES permit.

CSO LTCP Review

King County, Washington – 2008 Combined Sewer Overflow Plan Update: King County's revised Combined Sewer Overflow Control Program was somewhat different than the other CSO control plans or LTCPs. The revised program is not really a LTCP, which summarizes existing data on the program and uses these data for CSO control planning, but rather a required update to a well-established CSO program. In this case, the update summarizes activities that have been going on for multiple years and sets out a schedule for future activities, but it does not provide much discussion of program-related decisions on CSO control. The county's water quality monitoring activities have a watershed focus and, therefore, are not focused on tracking water quality improvements explicitly due to CSO mitigation. However, as the document states, CSOs are an important, but small, part of the overall water quality problems in the receiving waters, and a long-term plan is in place to control them, which may be sufficient. Based on a review of this document, with the perspective that the program is already quite advanced, it provides a good overview of a number of relevant programs used to comply with the CSO Control Policy requirements. However, it is difficult to determine whether the County has a complete CSO control document because this is the latest CSO control document in a very lengthy process. The major issue is whether this document meets Region 10's expectations for the required CSO Plan update, which may be different from the expectations for a LTCP from a less experienced program.

I. Sanitary Sewer Overflows (SSOs) & Peak Flows

SSOs

A critical step in controlling wet weather discharges from municipal wastewater sources is to ensure reporting of overflows to the NPDES authority. EPA believes that currently, most CSOs and bypasses at treatment plants are being adequately reported. However, information obtained in developing the 2004 Report to Congress on the Impacts and Control of CSOs and SSOs indicates that some NPDES authorities need to improve permittee reporting of SSOs.

Sewage overflows and bypasses at sewage treatment plants may endanger human health. Appropriate third party notification can reduce health risks associated with these releases.

Permits can establish a process for requiring the permittee or the NPDES authority to notify specified third parties of overflows that may endanger health due to a likelihood of human exposure, or to notify third parties of unanticipated bypass and upset that exceeds any effluent limitation in the permit or that may endanger health due to a likelihood of human exposure.

In April 2005, EPA's WPD distributed a draft fact sheet describing NPDES permit requirements for SSOs. The draft fact sheet is available at http://www.epa.gov/npdes/pubs/sso_fact_sheet_model_permit_cond.pdf. The draft fact sheet addresses how NPDES permits should be clarified to ensure SSOs and unanticipated bypasses and upsets are reported, along with other issues.

Peak Flows at Treatment Facilities

During heavy wet weather events, most municipal sewer collection systems and treatment facilities receive increased flows that can cause sewage overflows and backups in the collection system and create operational challenges at the plant. To maximize treatment of flows at the plant, minimize overflows of raw sewage in the collection system, and avoid plant damage and

operating problems, during wet weather, many POTWs route the portion of flow exceeding the capacity of the secondary units around the units.

Discharges from POTWs must meet effluent limitations based on the secondary treatment regulations (which establish 7-day and 30-day limits for TSS, BOD and pH) and more stringent WQBELs. In addition, the NPDES regulations establish standard permit conditions that apply to all NPDES permits. One standard condition that is important to peak wet weather diversions is the bypass provision at 40 CFR 122.41(m).

EPA addressed peak wet weather bypasses at POTWs that serve combined sewers in the CSO Control Policy. On December 22, 2005, EPA proposed a policy for implementing requirements for wet weather discharges at POTWs served by sanitary sewers. The December 2005 draft policy specifies that the bypass provision would apply to wet-weather diversions at POTWs serving separate sanitary sewer collection systems under all circumstances. Under the draft policy, NPDES authorities would be able to approve—in the NPDES permit—wet-weather diversions around secondary treatment based on a demonstration that, among other things, there are no feasible alternatives to the anticipated bypass.

SSO and Peak Flow Findings

All Region 10 states require municipal permittees to report SSOs, including SSOs that do not discharge to waters of the United States, to the permit authority. However, it appears that municipal satellite collection systems are not required to report SSOs from their systems. Region 10 continues to investigate the issue.

Municipal permits in Washington require notification of SSOs to the Health Department in shellfish areas. Washington permit writers have the option to also include notification of local health departments. Washington permits do not authorize bypasses at SSOs. The permits prohibit the bypasses but reference enforcement discretion and administrative orders. Ecology requires that all municipalities report SSOs. One regional office, the Northwest Regional Office (NWRO), sent a letter to all satellite systems in January 2008 to inform them of the requirement to notify Ecology of SSO incidents.

Washington authorizes or approve bypasses at POTWs serving combined sewers. The Region is currently evaluating whether the states have required the permittees to perform adequate feasibility analyses before the authorizations or approvals. In Washington, where it has taken a phased approach to CSO control since 1989, the state requires the permittees to conduct feasible alternative analyses, but the Region is not sure if those analyses meet the requirements of the 1994 CSO Control Policy.

J. Concentrated Animal Feeding Operations

Washington Ecology, Water Quality Program, is responsible for the regulation of CAFOs under the State Water Pollution Control Act. Under the act, any animal feeding operation that results in the disposal of wastes into waters of the state requires a discharge permit. Discharges to surface waters would require an NPDES permit and those to groundwater would require a state waste discharge permit. Waters of the state include both surface and ground waters. Normally, the CWA and state Water Pollution Act requirements are administered jointly.

According to information provided to EPA Headquarters by Region 10, 159 CAFOs are in Washington. Those are primarily in the dairy sector. Only 24 operations are covered by an NPDES permit; the remainder are operating without NPDES permits.

The current NPDES general permit was issued on June 21, 2008, and does not reflect the subsequent revisions to the CAFO regulations that were made as a result of the Waterkeeper decision. In view of those findings, the reissued NPDES general permit must be revised to reflect the promulgated revisions to the CAFO regulations.

Specific issues identified in the current general permit include the following:
In the Nutrient Management Plans section, in addition to the United Stated Department of Agriculture's Natural Resources Conservation Service (USDA/NRCS) Field Office Technical Guide the permittee should be encouraged to refer to other documents developed by USDA: Comprehensive Nutrient Management Plan (CNMP) Guidance (December 1, 2000) and NRCS General Manual, Title 190, Part 402 – Nutrient Management (November 24, 2000). The state should also refer the permitee to Comprehensive Nutrient Management Plans (CNMP) Technical Criteria, being developed by USDA, when it is finalized.

In the Environmental Monitoring section, the permit requires the annual soil testing of nitrate-nitrogen, which is more stringent than the federal requirements. However, the permit is less stringent than the federal requirements in that the permit does not require the soil to be analyzed a minimum of once every 5 years for phosphorus content.

Late in 2012, Region 10 staff began working closely with Ecology on the drafting of Washington's new CAFO permit.

K. Whole Effluent Toxicity (WET)

Regulations at 40 CFR 122.44(d) require that several factors be considered when determining WET RP. Among those factors, the monitoring data used should be representative of the effluent, including ensuring that effluent variability is considered and addressed (although any evidence of RP is deemed sufficient). 40 CFR 122.48(b) requires that permits establish monitoring requirements to yield data representative of the monitored activity, and 40 CFR 122.44(i)(l) requires that monitoring requirements ensure compliance with permit limitations. Monitoring frequencies are based on the nature of the facility, similar facilities, and, if applicable, the existing or previous (or both) permit's monitoring results or compliance history. In addition, EPA's 1991 Technical Support Document (TSD) for Water Quality-based Toxics Control recommends conducting toxicity tests quarterly for one year to adequately assess the variability of toxicity observed in effluents. Below the suggested initial minimum frequency, the chances of missing toxic events increases. The toxicity test result for the most sensitive of the tested species is considered to be the measured toxicity for an effluent sample.

Washington WET Findings
Permit Documentation: The municipal permit (WA0024023, City of Yakima) contains a chronic limit, and the industrial permit (WA0003239, Richmond Beach Asphalt Plant and Terminal) contains both an acute and a chronic WET limit, including sublethal endpoints such as fertilization using the sea urchin as the test organism. The industrial permit does not explain the WET RP decision to substantiate why WET limits were not required, while the fact sheet for the municipal permit indicates chronic RP, thus requiring chronic WET limits. The municipal permit

does include acute monitoring but no acute WET limits, and the rationale cited in the permit is based on a no observed toxicity finding under a previous permit along with the removal of the acute WET limit.

EPA WET Test Methods (cited): Both permits cite outdated EPA WET test methods. Both permits cite EPA's 1990 WET test methods, but the industrial permit adds an "or most recent version of referenced protocols" caveat for chronic testing, which would require the permittee to use EPA's most current (presently 2002) WET test methods. Both permits contain a general permit provision citation for monitoring to be conducted using methods pursuant to 40 CFR Part 136. It is suggested that outdated WET test method references be removed from the permit since the date specific references to a WET test method override general provisions. EPA general counsel advised that references to date-specified WET test methods are what drive the permit even if there are incorporations by reference to the current promulgated WET test methods. Therefore, it is better to include only a general permit condition that serves as an incorporation by reference to 40 CFR Part 136 and avoid permit language citing outdated analytical methods. In the Washington permits, if the 1990 WET test method reference were deleted and a strong reference to Washington's Ecology publication Laboratory Guidance and Whole Effluent Toxicity Test Review Criteria,[8] indicating that it contains the test methods permittee is to use) was emphasized, it would rectify that permit language inconsistency. The industrial permit requires acute testing with a freshwater invertebrate (Daphnid) and a marine vertebrate (Topsmelt or Silverside).

Permit Conditions and Monitoring: The municipal permit does not include an RP analysis for the decision to not include acute WET limits, but RP was demonstrated and included in the permit to support the requirement for chronic WET limits.

L. National Pretreatment Program

The General Pretreatment Regulations (40 CFR Part 403) establish responsibilities of federal, state, and local government; industry; and the public to implement pretreatment standards to control pollutants from the industrial users that could cause pass through or interfere with POTW treatment processes or that could contaminate sewage sludge.

The goal of this pretreatment program PQR was to assess the status of the pretreatment programs in Region 10, and assess specific language in POTW NPDES permits. With respect to NPDES permits, focus was placed on the following regulatory requirements for pretreatment activities and pretreatment programs:

40 CFR 122.42(b) (POTW requirements to notify the director of new pollutants or change in discharge)

40 CFR 122.44(j) (Pretreatment Programs for POTWs)

40 CFR 403.8 (Pretreatment Program Requirements: Development and Implementation by POTW)

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[8] Ecology, WQ-R-95-80. This publication, which is also known as the "Canary Book," is updated every year or so.

40 CFR 403.9 (POTW Pretreatment Program and/or Authorization to revise Pretreatment Standards: Submission for Approval)

40 CFR 403.12(i) (Annual POTW Reports)

40 CFR 403.18 (Modification of POTW Pretreatment Program)

This section also summarizes the following: which states have approved pretreatment programs, program oversight (number of audits and inspections conducted, numbers of significant industrial users (SIUs) in approved pretreatment programs, and numbers of categorical industrial users discharging to municipalities that do not have approved pretreatment programs), and the status of streamlining rule implementation.

POTW Program Oversight (Audits and PCIs)
According to PCS and ICIS 2007 data, 11 approved programs in Washington. PCS and ICIS have recorded that Washington did not conduct any audits or PCIs in 2006 or 2007.

It is difficult to assess whether the states are on target to meet Compliance Monitoring Strategy (CMS) goals (memorandum from OECA Assistant Administrator Nakayama, October 17, 2007). Data would be needed for the 5-year permit term for each POTW to assess CMS compliance, and only PCI and audit data for 2006 and 2007 are available. CMS goals are that one audit and three PCIs are conducted per 5-year NPDES permit term.

Categorical Industrial Users (CIUs) where EPA or State has Oversight
According to information reported in 2006, Washington has 192 SIUs in approved POTW programs. Also from 2006 data, the numbers of CIUs discharging to POTWs that do not have approved pretreatment programs were 34 in Washington.

Streamlining
At the time of the 2009 PQR, Washington was in the process of modifying their state codes to incorporate the requirements of the streamlining rules by reference; POTW program modification would follow state regulation adoption. Washington is not classified as a 40 CFR 403.10(e) state.

NPDES Permit Quality Review
For the permit review, EPA selected two permits in Washington. The permits were reviewed to determine whether they contain all requirements at 40 CFR 122.42(b), 40 CFR 403.8, and 40 CFR 403.12(i).

The discharge flows for the two POTWs reviewed are as follows:

1. Westside WWTP in Vancouver, WA – 12 mgd
2. Sumner, WA – 2.0 mgd

Pretreatment Program regulations at 40 CFR 403.8(a) require POTWs with *design flows greater than 5 mgd* with industrial wastewater that could cause pass-through or interference to develop pretreatment programs. Smaller designed POTWs may be required at the discretion of the EPA or state authority.

The permits from Washington contain pretreatment program requirements. One of the Washington permits was very thorough except that it does not include requirements at 40 CFR 122.42(b) to notify the director of new pollutants or changed discharge volume or character. The other Washington permit does not contain the 40 CFR 122.42(b) requirement and lacks many requirements listed at 40 CFR Part 403 such as legal authority, funding statement, monitoring, reporting, control mechanism, slug control evaluation, enforcement, public participation, local limits, or annual reports.

V. Action Items

The NPDES Regional Program and PQR identified areas where the Region and its states are doing well and recommended areas where improvement is needed. This section provides a summary of the main findings of the review and provides proposed Action Items to improve Region 10 NPDES permit programs. This list of proposed Action Items will serve as the basis for ongoing discussions between Region 10 and its authorized states, as well as between Region 10 and EPA Headquarters. The discussions should focus on eliminating program deficiencies to improve performance by enabling good quality, defensible permits issued in a timely fashion.

The proposed Action Items are divided into three categories to identify the priority that should be placed on each item and facilitate discussions between Regions and states.

- Category 1 - Most Significant: Proposed Action Items will address a current deficiency or noncompliance with a federal regulation.
- Category 2 - Recommended: Proposed Action Items will address a current deficiency with EPA guidance or policy.
- Category 3 - Suggested: Proposed Action Items are listed as recommendations to increase the effectiveness of the state's or Region's NPDES permit program.

The Category 1 and Category 2 proposed Action Items should be used to augment the existing list of follow-up actions established as an indicator performance measure and tracked under EPA's Strategic Plan Water Quality Goals or could serve as a roadmap for modifications to Region 10 program management.

Note that the NPDES Program Review for Region 10 took place in early fall 2008, and the states and Region 10 might have already taken significant steps for improvement in deficient areas.

Permit Quality Review

Core Permit Review

Overall, Ecology's permit quality appears to be quite good. Washington is the only state in Region 10 to reach its backlog goal. Proposed Action Items to help the state strengthen its NPDES permit program are the following:

Ecology should further bolster its fact sheets by addressing the following: (all Category 3)

- Fact sheets should include a clear discussion of which pollutants were evaluated and why.
- Ecology should complete development of its antidegradation procedure to clarify when antidegradation provisions apply and what is required to meet those requirements (and

permit documentation should address this as applicable).

- Ecology should include a standard heading for antibacksliding in the fact sheets to prompt consideration of and documentation regarding antibacksliding.
- Ecology should document receiving water quality (or impairment) in fact sheets.
- Ecology should include in its fact sheets clear references to permit limit calculation documents or files that are not included in those fact sheets but are maintained elsewhere in the permit file.

A. Mercury Methods

A review of mercury methods specified in the permits reviewed for the Region 10 states indicates that the permits generally reference methods available under 40 CFR Part 136 but do not specify the more stringent mercury methods. Of the seven permits reviewed that required monitoring for mercury, six permits require the use of methods approved in 40 CFR Part 136, and one permit requires the use of method 1631E. Proposed Action Items for Region 10 and its states are the following:

- Region 10 should ensure that the states are aware of the most current mercury methods and should verify that each state is incorporating sufficiently sensitive analytical methods into relevant permits. See Analytical Methods for Mercury in National Pollutant Discharge Elimination System (NPDES) Permits, at http://www.epa.gov/npdes/pubs/mercurymemo_analyticalmethods.pdf. (Category 2)
- States in Region 10 should implement policies and procedures to evaluate which methods are appropriate for application data and monitoring during the permit term. (Category 2)

B. Impaired Waters

No specific findings related to impaired waters.

C. TMDLs

Proposed Action Items for Region 10 and states are the following:

- The fact sheet or permit file should include consistent documentation regarding whether the receiving water is listed as a §303(d) impaired waterbody. (Category 3)
- The fact sheet or permit file should include discussion of whether a facility discharges pollutants of concern and, if so, how the permit conditions were developed consistent with state requirements to account for such impairments. (Category 3)
- Region 10 and the states should continue to document the status of relevant TMDLs in the fact sheet or permit files, including how permit conditions reflect applicable TMDL results. (Category 3)

D. Use of E. coli and Enterococcus Bacteria Standard

Washington permits reviewed implement the applicable state standards for E. coli or fecal coliform, which are consistent with the corresponding federal standards. Washington WQS include standards for fecal coliform. Washington Ecology and DOH implement the BEACH

program, which monitors beaches for enterococcus levels). A proposed Action Item for Region 10 and states is as follows:

No action item for finding.

E. Antidegradation and Mixing Zones

As identified under Core Permit Review section, Ecology should bolster fact sheet discussions related to the authorization of mixing zones and antidegradation.

F. Thermal Variances & Cooling Water Intake Structures [CWA §316(a) & 316(b)]

With regard to temperature discharge limits and variances under CWA §316(a), most of the permits reviewed indicate that the temperature limits in the permits are based on the use of a mixing zone. Most of the permits reviewed do not include permit conditions implementing §316(b). Phase II rule is promulgated. Region 10 and states should implement the following proposed Action Items to improve implementation of §316(a) and (b) requirements in permits:

- Permits and fact sheets should explicitly document the basis (including the use of mixing zones) for any§316(a) thermal variances. (Category 1)
- States should include §316(b) cooling water intake structure permit conditions for existing facilities on a BPJ basis, and the basis for the determination of Best Technology Available should be documented in the permit fact sheet. (Category 1)
- States should ensure that §316(b) is applied to all applicable facilities, not just power generating facilities. (Category 1)
- States should reevaluate any §316(a) thermal variances and §316(b) requirements at each permit renewal and document the basis in the permit fact sheet. Prior determinations should also be documented in the fact sheet and reflected in the current permit, as appropriate. (Category 1)

G. Stormwater

Region 10 and its states spend a significant amount of time dealing with ESA issues and permit appeals, and this adds to the resource burden in the stormwater program. Virtually every stormwater action taken in Washington is appealed. Recently, Washington won a district court decision requiring MS4s to consider Low Impact Development (LID) as a component of Maximum Extent Practicable when developing local stormwater management programs.

Proposed Action Items for Region 10 and states are the following:

With regard to Phase II MS4 permits: (all Category 2)

- Public Education—Permits should specifically identify (or require the permittee to identify) a focused set of target audiences and build and evaluate public education programs around water quality priorities.
- Post Construction—Permits should include some type of objective, performance standard, design standard, or outcome and should include more quantifiable requirements regarding inspection frequencies and maintenance agreements and tracking.

- Pollution Prevention and Good Housekeeping—For the next permit term, the scope of requirements should be more comprehensive. For examples, see Chapter 6, Pollution Prevention/Good Housekeeping, in the EPA MS4 Permit Improvement Guide, at http://www.epa.gov/npdes/pubs/ms4permit_improvement_guide.pdf.
- Monitoring—Simplify QAPP requirements and develop an approach to estimate pollutant loadings. Develop a long-term indicator program (physical, biological in-stream indicators), so that by the end of the permit term, something meaningful is in place.
- Reporting—Permits should include a discrete set of quantifiable variables that are reported. Suggest the use of EPA's new annual report status summary cover sheet.

H. Combined Sewer Overflows

No action items were identified for Washington's CSO program.

I. Sanitary Sewer Overflows

All Region 10 states require municipal permittees to report SSOs to the permit authority. It appears, however, that municipal satellite collection systems are not required to report SSOs from their systems. Washington does not require such notification, but Washington requires its permittees to notify the Washington DOH of bypasses and overflows so DOH can notify the drinking water facilities. Washington permit writers have the option to include notification of local health departments. Municipal permits in Washington also require notification of SSOs in shellfish areas to the Health Department. Washington permits do not authorize or approve bypasses of SSOs. The permits prohibit bypasses, but reference enforcement discretion and administrative orders.

- Region 10 should ensure that Washington conducts adequate feasibility analyses before approving bypasses in permits. (Category 1)
- Region 10 should work with its states to ensure that municipal satellite collection systems are required to report SSOs. (Category 2)

J. Concentrated Animal Feeding Operations

The states in Region 10 have made progress in developing NPDES permits to regulate the discharge of pollutants from CAFOs. Some permits need to be updated to meet the requirements of the federal regulations. Proposed Action Items for Region 10 and states are the following:

The current Washington State NPDES general permit was issued on June 21, 2008, and does not reflect the subsequent revisions to the CAFO regulations as a result of the Waterkeeper decision. The reissued NPDES general permit, among other things, must be reissued taking the following into consideration: (Category 1)

- Require the soil to be analyzed a minimum of once every 5 years for phosphorus content. The CAFO permit requires phosphorus sampling every 5 years as one of the minimum elements of a nutrient management plan, and, because the NMP terms are the terms of the permit coverage, this meets the CAFO federal rule requirement.
- CAFO regulations require that only CAFOs that discharge or propose to discharge must apply for an NPDES permit. Permit section S2.A states, "This permit is applicable to:

CAFOs that are discharging or proposing to discharge to state waters, CAFOs that are required by federal rule to obtain permit coverage, and AFOs or CAFOs that seek permit coverage."

- That language meets the federal CAFO rule requirements.
- CAFO regulations require greater public participation in the issuance of a CAFO NPDES permit. Permitting authorities are required to review the NOI and NMP and allow the public meaningful review and comment on each, as well as on the terms of the NMP that are incorporated into the permit. The CAFO program is being implemented in that way. All NMPs are reviewed by both Washington State Department of Agriculture and Ecology. Once the NMP is acceptable to Ecology, public notice is run once a week for 2 weeks. From the date of the second public notice, a 30-day public comment period begins when the NMP can be reviewed and commented on.
- EPA has removed the 100-year, 24-hour storm containment structure standard for new large swine, poultry and veal facilities, because of lack of a record supporting this technology, and has replaced it with a zero-discharge requirement. Washington's CAFO permit still includes the 100-year, 24-hour storm event language for new large swine, poultry, and veal facilities. That will be removed during the next permit rewrite and reissuance. The same section (S1.A) which addresses new large swine, poultry, and veal operations also states that discharge is prohibited unless the facility is designed to meet the 100-year, 24-hour rainfall event standards.
- CAFO regulations allow CAFO operators to voluntarily certify that they do not discharge or propose to discharge and as such have no duty to apply for an NPDES permit. Region 10 staff members have had several discussions with Ecology coordinated by ASWIPCA to make clear that delegated states have the choice of adopting a voluntary certification program, and that such a program is not required. At this time, Washington has chosen not to adopt voluntary certification.
- CAFO regulations include a framework for identifying the terms of the NMP that must be enforceable requirements of a CAFO's NPDES permit. The framework includes two alternative approaches for specifying terms of the NMP with respect to rates of application, which are needed to satisfy the requirement of the NMP include "protocols to land apply manure, litter or process wastewater…that ensure appropriate agricultural utilization of the nutrients" [40 CFR 122.42(e)(1)(viii)]. The framework also includes supplemental annual reporting requirements for permitted CAFOs to accompany these alternative approaches. NMP types (linear and narrative) are not yet specified in the current CAFO permit. This will be updated during the next permit rewrite and reissuance. Permit section S3 also addresses the minimum elements that a NMP must include to be considered acceptable by Ecology.

K. Whole Effluent Toxicity

EPA Region 10 should consider increasing its state oversight and coordination of NPDES state WET program implementation to ensure compliance with states' aquatic life protection (or WET) WQS. That could include an analysis of state WET programs (Oregon and Washington). EPA should ensure that EPA WET test methods are incorporated by reference to 40 CFR Part 136 in all permits to avoid inconsistent references to outdated methods. EPA Region 10 should

ensure that the state fact sheets thoroughly document the rationale for each permit decision and requirement (or lack of permit requirements) including monitoring, reductions in monitoring frequency, or a WET limit. The state permits, at a minimum, should provide a clear explanation to substantiate their WET permit decisions and WET RP assessments including providing a summary or reference to the supporting WET data.

The proposed Action Item for Washington follows.

- Permits must require the appropriate test species for the receiving waterbody (i.e., freshwater species for freshwater receiving waters and marine species for estuarine or marine receiving waters). However, if a different choice of test organism is selected because of the nature of the effluent, all acute testing (with an invertebrate and a vertebrate) should be done with the same approach such that the test organisms used should both be a saltwater species (or freshwater species) and not split (one freshwater, and one saltwater test organism) as is presently included in the industrial permit reviewed.(Category 2)

L. Pretreatment Program

The permits and fact sheets reviewed contain some deficiencies. Washington had one very detailed permit that lacks only the requirements at 40 CFR 122.42(b). The second permit lacks many required components. The state must ensure that all required components are included in the NPDES permits. (Category 1)

- Region 10 should work with Washington to ensure that audits and PCIs are being conducted as required and that the data are being reported into PCS/ICIS. (Category 3)

State Review Framework

I. Background on the State Review Framework

The State Review Framework (SRF) is designed to ensure that EPA conducts nationally consistent oversight. It reviews the following local, State, and EPA compliance and enforcement programs:

- Clean Air Act Stationary Source
- Clean Water Act National Pollutant Discharge Elimination System
- Resource Conservation and Recovery Act Subtitle C

Reviews cover these program areas:

- Data — completeness, timeliness, and quality
- Compliance monitoring — inspection coverage, inspection quality, identification of violations, meeting commitments
- Enforcement actions — appropriateness and timeliness, returning facilities to compliance
- Penalties — calculation, assessment, and collection

Reviews are conducted in three phases:

- Analyzing information from the national data systems
- Reviewing a limited set of State files
- Developing findings and recommendations

Consultation is also built into the process. This ensures that EPA and the State understand the causes of issues and seek agreement on actions needed to address them.

SRF reports are designed to capture the information and agreements developed during the review process in order to facilitate program improvements. EPA also uses the information in the reports to develop a better understanding of enforcement and compliance nationwide, and to identify any issues that require a national response.

Reports provide factual information. They do not include determinations of overall program adequacy, nor are they used to compare or rank State programs.

Each State's programs are reviewed once every four years. The first round of SRF reviews began in FY 2004. The third round of reviews began in FY 2012 and will continue through FY 2016.

II. SRF Review Process

Review period: FY 2011

Key dates:

- Overall Kickoff letter sent to State: **February 10, 2012**
- RCRA Kickoff letter sent to State: **February 15, 2012**
- CAA Kickoff letters sent to State and LAAs: **February 24, 2012**
- CWA Kickoff letter sent to State: **June 29, 2012**
- Kickoff meeting conducted: **N/A**
- Data metric analyses and file selection lists sent to State and LAAs:
  - **RCRA on May 17, 2012**
  - **CAA to Ecology on May 9, 2012**
  - **CWA on June 29, 2012**
  - **CAA to PSCAA on August 2, 2012**
  - **CAA to SWCAA on August 14, 2012**
- On-site file reviews conducted: **Multiple Days Between April and September 2012**
  - NPDES On-site file review conducted:
    - Lacey, August 2, 2012
    - Bellevue, August 23, 2012
    - Yakima, September 13, 2012
  - RCRA On-site file reviews conducted:
    - Richland, April 18, 2012
    - Yakima, June, 20, 2012
    - Bellevue, July 3, 2012
    - Spokane, July 24, 2012
    - Lacey, August 14, 2012
  - CAA On-site file reviews conducted:
    - Ecology's Industrial Section in Lacey, May 14, 2012
    - Ecology in Spokane, May 30-31, 2012
    - Ecology in Yakima, June 1, 2012
    - PSCAA in Seattle, September 11-14, 2012
    - SWCAA in Vancouver, September 12-13, 2012
- Draft report sent to State: **April 30, 2013**
- Report finalized: **August 20, 2013**

Communication with the State:

- Region 10 has kept Ecology and the LAAs generally informed about SRF since the beginning of the SRF Round 1 process in 2004. Ecology and the LAAs were informed of the new SRF process and the training EPA provided through various meetings, phone conversations, and emails. SRF discussions have been included in each biennial Performance Partnership Agreement process to ensure Ecology is aware of the SRF quadrennial review schedule and is continuing to work on incomplete SRF action items.
- Following the Regional Administrator's letter to Ecology's Director to initiate this

specific SRF process, each Region 10 review program sent media-specific kickoff letters to their respective programs in Ecology and the two LAAs being reviewed. Letters were also sent to the other five LAAs in WA informing them that they were not being included in this quadrennial review.

- To initiate the CWA review, Region 10 worked closely with the Ecology data team to populate the data metrics because Ecology had been unable to submit data to PCS or ICIS-NPDES. (The Air and RCRA programs used OTIS to populate their data metrics.)
- Each Region 10 review program worked closely with their contacts in Ecology and the two LAAs to implement the reviews. As soon as they were approved by OECA, data metric analyses and file selection lists were shared and discussed with the State and LAA programs. In addition to working with lead contacts at Ecology, each Region 10 review program worked with each of Ecology's Regional Offices where on-site file reviews were to be conducted to schedule reviews, ensure each office had the list of files to be reviewed, and ensure files and appropriate staff would be available for the scheduled on-site review dates and times.
- When needed during on-site file reviews, the review teams met with the inspectors and managers to either clarify information in the files or get more information.
- When Ecology or the LAAs preferred, Region 10 reviewers conducted brief exit meetings after the on-site file reviews to highlight some of the things that were readily apparent during the file reviews, such as the need to sign inspection reports and corrections needed to match database information with file information.
- CWA and RCRA reviewers sent preliminary file review results to their respective Ecology programs for review to ensure information was properly and adequately understood and captured.
- Ecology and LAA programs were also contacted for information to include in Appendix E, Program Overview.
- Per the SRF Round 3 Guidance, the draft Report was not shared with the State until after OECA had reviewed and approved several iterations of changes. The OECA-approved draft Report was sent to Ecology and the LAAs for a 45-day review period, and each agency provided comments. Ecology and SWCAA provided comments in the "State Response" portion of Elements within the draft Report. Ecology also provided a letter with general comments – see Appendix G. PSCAA provided a comment letter; Element-specific comments were excerpted from the letter and inserted in the relevant "State Response" portions. PSCAA's response letter is included as Appendix H. Region 10 had several subsequent communications with Ecology and the LAAs to ensure their responses were understood and addressed appropriately.

State and EPA regional lead contacts for review:

- Kelly Susewind, Program Manager, Ecology Water Quality
- Greg Stegman, EPA Liaison, Ecology Water Quality
- Nancy Kmet, PARIS Data Manager, Ecology Water Quality
- Robert Grandinetti, Region 10 NPDES SRF Reviewer and Report Writer
- Richard Hibbard, Ecology Air Quality
- Steve Van Slyke, Compliance Manager, Puget Sound Clean Air Agency
- Randy Peltier, Operations Manager, Southwest Clean Air Agency

- Rindy Ramos, Region 10 Air SRF Reviewer and Report Writer
- Paul Koprowski, Region 10 Air SRF Reviewer and Report Writer
- Roylene Cunningham, Region 10 Air SRF File Reviewer
- Laurie Kral, Region 10 AFS Data Manager
- K Seiler, Manager, Ecology Hazardous Waste and Toxics Reduction Program
- Jim Pearson, Ecology RCRA Information Management Specialist
- Mike Slater, Region 10 RCRA SRF Reviewer and Report Writer
- Cheryl Williams, Region 10 RCRA Compliance Team Leader
- Jack Boller, Region 10 RCRA Washington State Coordinator
- Christine Kelly, Region 10 SRF Coordinator

III. SRF Findings

Findings represent EPA's conclusions regarding State performance, and may be based on:

- Initial findings made during the data and/or file reviews
- Annual data metric reviews conducted since the State's Round 2 SRF review
- Follow-up conversations with State agency personnel
- Additional information collected to determine an issue's severity and root causes
- Review of previous SRF reports, MOAs, and other data sources

There are four types of findings:

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, **and** are innovative and noteworthy, **and** can serve as models for other States. The explanation must discuss these innovative and noteworthy activities in detail. Furthermore, the State should be able to maintain high performance.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern **or** problem. Generally, States are meeting expectations when falling between 91 to 100 percent of a national goal. The State is expected to maintain high performance.

Area for State Attention: The State has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires State attention when the State falls between 85 to 90 percent of a national goal. The State should correct these issues without additional EPA oversight. The State is expected to improve and achieve high performance. EPA may make recommendations to improve performance but they will not be monitored for completion.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires State improvement when the State falls below 85 percent of a national goal. Recommendations are required to address the root causes of these problems, and they must have well-defined timelines and milestones for completion. Recommendations will be monitored in the SRF Tracker.

Clean Water Act Findings

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding	**Area for State Improvement**
Description	For the period of review (i.e., FY 2011) and at the time of on-site review (August/September 2012), the State was not entering data into the EPA national data system of record (PCS). The following Explanation and Recommendation are based on that status of lack of data entry. It should be noted, however, that by the time of the final SRF report, the State's database was linked with EPA's database and data were flowing to ICIS-NPDES.
Explanation	The State of Washington created a new State-wide data system in 2010 (PARIS). The State stopped batching data into PCS in April of 2010 because PARIS was unable to link up to PCS. The State needs to develop a new link in order to re-establish the link to PCS, and eventually to ICIS. The original date Ecology intended to be able to send data flow to PCS was June of 2011. However, due to funding issues and various delays with EPA HQ, that date was pushed back. The new proposed date that the State will link to ICIS-NPDES will be March of 2013. Therefore, from April 2010 until approximately March of 2013 no Washington data shows in EPA's national system of record (PCS or ICIS-NPDES). As of December 2012, the link between the two databases has been made and is presently being tested. Uploading to ICIS-NPDES is expected to be fully operational by March 2013.
Relevant metrics	1b1 – Permit limits rate for Major facilities, National Goal >= 95%, OTIS values 69/69 = 100%, State data values 74/74 = 100% 1b2 – DMR entry rate for Majors, National Goal >= 95%, OTIS values 1/1330 = 0.1%, State data values 888/905 = 98% 1c1 – Permit limit rate for non-Major facilities, OTIS values 187/360 = 51.9%, State data values 353/353 = 100% 1c2 – DMR entry rate for non-Major facilities, 0/4450 = 0% For this metric, because Washington does not submit data into ICIS-NPDES and Region 10 relied on the data from the state system, there was a overall gross calculation performed (i.e., for all facilities – general, minor, major, construction, msgp) for this calculation. 20609/34144 = 60%; national goal = 100%
State response	Ecology is currently flowing data from PARIS to ICIS and met the March 2013 timeframe. With EPA's agreement, Ecology changed its path from flowing data from PARIS to PCS to going directly to ICIS. This ultimately

made more sense and was preferred by both Ecology and EPA because of the quality of Washington state data in PARIS as compared to the quality of data in PCS. This meant EPA did not flow any historical PCS data for Washington into ICIS. This change slowed down the dataflow process because it required EPA and its contractors to build a component to allow Ecology to send some past and current data directly to ICIS. Ecology now sends basic permit information, narrative condition and compliance schedules, inspections, enforcement action milestones and enforcement actions to ICIS for all individual and general NPDES permit coverages as well as the state issued Industrial User permits that discharge to POTWs. In addition Ecology is sending permit features (outfalls/monitoring points) with the associated limit sets and the associated DMR data for all individual NPDES permits. Currently the dataflow shows an error rate of 1.8% for DMR data meaning that a very small portion (<1.8%) of the data is not flowing to ICIS.

Recommendation

Ecology will continue to work with EPA Region 10 and EPA HQ to get Washington's data system communicating with and uploading data to ICIS-NPDES by March 2013. Region 10 will monitor data entry following the transition to ICIS-NPDES. After two consecutive quarters of data entry into ICIS-NPDES, Region 10 will close this recommendation. If this recommendation remains open in calendar year 2014, Region 10 will work with Ecology to devise a plan to resolve remaining issues.
(EPA Note: By the time of this final SRF report, Ecology's data system was communicating with and uploading data to ICIS-NPDES.)

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding	**Area for State Improvement**
Description	The State is not currently entering data into the EPA national data system.
Explanation	Although the State has not been entering all of the Water Enforcement National Data Base Elements (WENDBE) into PCS, the facility level data were complete for most facilities reviewed at the time of the file review process. See the Element 1 Explanation for more information.
Relevant metrics	2b – Files reviewed where data are accurately reflected in the national data system 27/34 = 79.4%; national goal = 95%
State response	See response to Element 1.
Recommendation	See the Element 1 Recommendation.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding	**Area for State Improvement**
Description	The State is not currently entering data into the EPA national system.
Explanation	Even though the State has not been entering all of their data into PCS, the facility level data were in PCS for most facilities reviewed during the file review process. See the Element 1 Explanation for more information.
Relevant metrics	3a – Timeliness of mandatory data entered in the national data system 0/34 = 0%; national goal = 100%
State response	See response to Element 1.
Recommendation	See the Element 1 Recommendation.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in State/EPA agreements.

Finding	**Meets Expectations**
Description	The elements that were negotiated and pertain to the bi-annual (July 1, 2009 – June 30, 2011, and July 1, 2011 – June 30, 2013) Performance Partnership Agreement (PPA) were: number of pretreatment compliance inspections with audits; significant industrial user inspections for SIUs discharging to non-authorized POTWs; EPA and State oversight inspections by approved POTWs; Major CSO inspections; SSO inspections; industrial stormwater inspections; Phase I and II construction stormwater inspections; and inspections of large and medium NPDES-permitted CAFOs.
Explanation	For all of these measures the State met or exceeded 100% of their commitments. It is important to note that the CAFO permit program is administered by Ecology, but the compliance monitoring and enforcement is administered through an MOU with the Washington Department of Agriculture. We encourage Ecology and Washington Department of Agriculture to work toward entering the CAFO data into PARIS.
Relevant metrics	4a1 – Pretreatment compliance inspections and audits, 4a2 – Significant industrial user (SIU) inspections for SIUs discharging to non-authorized POTWs, 4a3 – EPA and state oversight of SIU inspections by approved POTWs, 4a4 – Major CSO inspections, 4a5 – SSO inspections, 4a8 – Industrial stormwater inspections, 4a9 – Phase I and II stormwater construction inspections, 4a10 – Inspections of large and medium NPDES permitted CAFOs, and 4b – Planned commitments completed. 4a1 7/6 = 116.7%; national goal = 100% 4a2 59/59 = 100%; national goal = 100% 4a3 2/2 = 100%; national goal = 100% 4a4 5/5 = 100%; national goal = 100% 4a5 4/4 = 100%; national goal = 100% 4a8 406/100 = 406%; national goal = 100% 4a9 722/100 = 722%; national goal = 100% 4a10 8/8 = 100%; national goal = 100% 4b 4/4 = 100%; national goal = 100%
State response	
Recommendation	None required.

Element 5 — Inspection Coverage: Completion of planned inspections.

Finding	**Meets Expectations**
Description	In the bi-annual PPA, the State was to follow the CMS.
Explanation	The State met or exceeded all commitments of the CMS and negotiated PPA agreements. Specifically, for inspections for 5a1, the State agreed to do 50% and their performance was 58%; for inspections described in 5b2, the State agreed to do 20% and their performance was 36%; and for inspections for 5b2, the State agreed to do 10% and their performance was 30%.
Relevant metrics	5a1 – Inspection coverage of NPDES Majors, 5b1 – Inspection coverage of NPDES non-Majors, and 5b2 – Inspection coverage of NPDES non-Majors with General Permits. 5a1 43/74 = 58%; national goal = 50% 5b1 127/353 = 36%; national goal = 20% 5b2 1355/4451 = 30%; national goal = 10% (Values from State data system)
State response	
Recommendation	None required.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding	**Meets Expectations**
Description	Inspection reports should be detailed enough to provide facility information and allow a reviewer to make a compliance determination independent of the inspector.
Explanation	This portion of the review included determining whether the inspection reports provided sufficient documentation to determine compliance at the facility and whether the inspection reports were completed in a timely manner. For CEI inspections, reports are to be done within 30 days from the date of the inspection; for CSI inspections, reports are to be completed within 45 days. The percentage of inspections that had sufficient documentation was 100%, and the percentage of inspection reports that were completed on time was 90%.
Relevant metrics	6a – Inspection reports reviewed that provide sufficient documentation to determine compliance at the facility, and 6b – Inspection reports completed within prescribed timeframe. 6a 31/31 = 100%; national goal = 100% 6b 28/31 = 90.3%; national goal = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in the national database based on inspection reports and other compliance monitoring information.

Finding 7-1	**Meets Expectations**
Description	Inspection reports that were reviewed and compared to the data in the State system showed accurate compliance determinations.
Explanation	This Element has two findings; finding 7-1 pertains to accurately made compliance determinations. The State had a 100% rate for accurately determining compliance through their inspections when compared to the information in their data system. Though the State does not input data into PCS, Region 10 was able to utilize the Washington State data system for this analysis.
Relevant metrics	7d1 – Major Facilities in noncompliance, 7e – Inspection reports reviewed that led to an accurate compliance determination. The calculation below only shows 7e, because though there were violations at major facilities (7d1), the review of the inspection reports showed that the findings of the reports were consistent with the data. 7e 31/31 = 100%; national goal = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-2	**Area for State Improvement**
Description	National database accurately reflects the compliance status of facilities.
Explanation	This Element has two findings; finding 7-2 pertains to accurate compliance data in the national database. The State does not currently input their data into the national system, which has been identified above as an area for State Improvement. See the Element 1 Explanation for more information.
Relevant metrics	7a1 – Number of Major facilities with Single Event Violations (SEV), 7a2 – Number of non-Major facilities with SEVs, 7g1 – Non-major facilities in category 2 noncompliance and 7h1 – Non-Major facilities in noncompliance. 7a1 – state is not entering data into the national system 7a2 – state is not entering data into the national system 7g1 – state is not entering data into the national system 7h1 – state is not entering data into the national system
State response	See response to Element 1.
Recommendation	See the Element 1 Recommendation for overall data entry into the national database. For SEV entries specifically, the State has requested to receive SEV training from EPA. EPA will provide training, and Ecology will then enter SEVs in their data system.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding	**Area for State Improvement**
Description	The State is not currently entering data into the EPA national data system. For SNCs, Ecology's current data system does not have the capability of determining SNCs.
Explanation	Ecology is not currently reporting data to the national data system. See the Element 1 Explanation for more information. Also, Ecology is not presently entering SEVs into any data system, so SNCs for SEVs are not being entered. For SNCs, once Ecology's database is linked to ICIS-NPDES, Ecology will be utilizing ICIS-NPDES to determine SNCs. With this change, Ecology will also be able to enter SEV SNCs into ICIS-NPDES.
Relevant metrics	8b – SEVs accurately identified as SNC, and 8c – Percentage of SEVs identified as SNC reported timely. 8b 1/8 = 12.5%; national goal = 100% 8c 0/7 = 0%; national goal = 100%
State response	Not possible to calculate SNC with Ecology's current database. Staffing levels at Ecology prevent manual calculation. Once the database is upgraded and the proper link established, Ecology's database and ICIS-NPDES will be able to calculate SNCs.
Recommendation	See the Element 1 recommendation for overall data entry into the national database. Per the Element 7 recommendation, Ecology will receive SEV training from EPA, including SNC determination for SEVs. After the training and data flow needs are addressed, Ecology will enter SEVs and SEV SNCs into their data system. Once Ecology's database is linked to ICIS-NPDES, Ecology will utilize ICIS-NPDES to determine other SNCs.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding	**Meets Expectations**
Description	Compliance orders, warning letters, and notices of violations were reviewed in the facility files to assess return to compliance.
Explanation	Of the 20 facilities evaluated where an enforcement action had been taken, 19 facilities demonstrated compliance after the action was taken. This is a 95% compliance rate which meets the criterion for Meets Expectations.
Relevant metrics	9a – Percentage of enforcement responses that return or will return source in SNC to compliance. 9a 19/20 = 95%; national goal = 100%
State response	
Recommendation	None required.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding	**Meets Expectations**
Description	The file review showed that timely and appropriate enforcement was taken to return facilities to compliance.
Explanation	Of the 20 enforcement actions reviewed, 19 indicated that the State's actions were both timely and appropriate for the violations in order to return the facility back to compliance. The percentage for this metric was 95%, which meets the criterion of Meets Expectations.
Relevant metrics	10b – Enforcement responses reviewed that address SNC that are appropriate to the violations. 10b 19/20 = 95%; national goal = 100%
State response	
Recommendation	None required.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding	**Area for State Attention**
Description	In the last round of SRF reviews, the State had 0 penalty actions that took both economic benefit and gravity into consideration. During this SRF review, 7 penalty actions out of the 9 reviewed took both gravity and economic benefit into consideration.
Explanation	During the last round of SRF reviews, there were 7 Ecology files in which penalty actions were taken. However, there were no economic benefit calculations for any of the 7 penalties. For some of these, there might have been little or no economic benefit. However, a detailed analysis showed that at least 2 of these cases should have included an economic benefit calculation. For the penalty actions that were reviewed during this present SRF round, 7 out of 9 files documented consideration of both gravity and economic benefit in the penalty calculations. This is a 78% success rate, a rate suggested by the SRF guidance to warrant an Area for State Improvement. However, given the small number of files and the substantial improvement by the State, Region 10 finds this to be an Area for State Attention. The State should continue to evaluate both gravity and economic benefit and strive for doing so for 100% of their penalty cases.
Relevant metrics	11a – Penalty calculations that included gravity and economic benefit. 11a 7/9 = 78%; national goal = 100%
State response	The state takes economic benefit into account for every penalty issued through the last question in the Penalty Calculation matrix used to calculate penalty amounts: Did anyone benefit economically from non-compliance? • Answer "no" if it is clear that no one obtained an economic benefit. • Answer "possibly" if someone might have benefited. • Answer "probably" if anyone benefited, but the benefit is not quantifiable. • Answer "definitely" if the economic benefit is quantifiable. Ecology does not use EPA's BEN and ABLE models.
Recommendation	None required.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding 12-1	**Meets Expectations**
Description	If there is a difference between proposed and final penalty amounts, the State needs to justify and document the difference and their rationale for the difference.
Explanation	In the penalty actions reviewed, most did not differ between the penalty amount assessed and the amount collected. In the two cases where the proposed and final penalty amounts differed, the files contained proper documentation and the difference in the penalty amount was consistent with State policies. One settlement contained a supplemental environmental project and the value of the project meets the general requirements of the Supplemental Environmental Projects portion of the State of Washington's Compliance Assurance Manual. The other settlement contained documentation in the file justifying the difference in the penalty amount in accordance with the State's Compliance Assurance Manual.
Relevant metrics	12a – Documentation on difference between initial and final penalty. 12a = 2/2 = 100%; national goal = 100%
State response	
Recommendation	None required.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding 12-2	**Area for State Attention**
Description	Documentation of paying the penalty in the facility file.
Explanation	Seven out of the nine facility files reviewed indicated that a penalty was paid. This is important documentation to ensure the State does collect the penalty assessed during the enforcement process. As an oversight agency, EPA needs to ensure that penalties are not only assessed, but also collected.
Relevant metrics	12b – Penalties collected 12b 7/9 = 78%; national goal = 100%
State response	Penalty payments are tracked electronically using the Docket Management System database. This is linked to the Fiscal Office Accounts Receivable database. A process is in place to refer unpaid penalties to a Collection Agency and to obtain a Superior Court judgment that can be turned over to the collection agency to put a lien on property.
Recommendation	None required.

Clean Air Act Findings

Washington Department of Ecology

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding 1-1	**Meets Expectations**
Description	The data in the national database are complete.
Explanation	Element 1 includes all the data verification metrics. This element measures whether reporting of Minimum Data Requirements (MDRs) into AFS is complete at the time the data are pulled from AFS for use in the SRF. Metrics are limited to stationary sources that compose the federally reportable universe and activities associated with them that occurred during the review year.
Relevant metrics	Data metric 1a1 Number of Active Major Facilities (Tier 1) –26 Data metric 1a2 Number of Active Synthetic Minors (Tier 1) – 22 Data metric 1b4 Number of Active Federally-Reportable Title V Facilities – 26 Data metric 1c2 Number of FCEs at Tier 1 Facilities (Activity Count) – 21 Data metric 1f1 Number of HPVs Identified (Activity Count) – 0
State response	
Recommendation	None required.

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding 2-1 **Area for State Improvement**

Description Data reported in the national system are not accurately entered and maintained.

Explanation Of the 15 files reviewed, five contained a data entry error or the reviewer was unable to verify the accuracy of an AFS data input. Minimum Data Requirements (MDRs) for ten files were found to have been accurately entered in AFS. The following is a list of discrepancies noted: For Goldendale Generating Station, a FCE dated 8/31/11 was not entered in AFS. For SDS Lumber, an off-site FCE dated 3/29/11 is entered in AFS. Documentation in the file indicates that an onsite PCE was conducted on that date. For D&L Foundry, a source test dated 8/12/11 was not entered into AFS. For REC Solar Grade Silicon, the Notice of Violation Docket # 8031 found in the source files is dated October 26, 2010 whereas the entry in AFS is dated November 26, 2010. Also, the Notice of Penalty Docket # 8256 in the file is dated February 3, 2011 whereas the entry in AFS is dated March 3, 2011. The MDR date is the date a formal penalty action is issued, not the date a penalty is collected.

Industrial Section – Review of Air Monitoring Reports
Ecology's Industrial Section receives Monthly Air Reports from the aluminum and pulp and paper facilities it regulates. These reports contain a summary of any source testing that is required for a given month. Compliance information (source test results) is entered into a facility Compliance Monitoring Worksheet.

One of the items to consider in evaluating the accuracy of MDRs is whether or not the date a source test is conducted is accurately entered in AFS. During the on-site review, copies of the source test reports were not available for review. EPA was unable to compare the date in AFS against the stack test report date.

Subsequent to the onsite review, copies of the Compliance Monitoring Worksheets for Intalco, Kimberly Clark Tissue Company, Longview Fibre, and Simpson Tacoma Kraft Company were made available to EPA. A copy of the Compliance Monitoring Worksheet for Alcoa Wenatchee Works was attached to that facility's FCE and was available during the on-site review. Based on the worksheets listed above, EPA was able to compare and verify the source tests dates for three of the companies.

(EPA Note: The "Explanation" here for source test data was partially changed based on follow-up communications with Ecology.)

Relevant metrics

Data Review Indicator 2a– Major Sources Missing CMS Source Category Code – 1
File Metric 2b – Accurate MDR data in AFS (10/15) = 66.7% of files, Goal = 100%.

State response

Ecology's permitting offices (CRO, Industrial Section, and ERO) responded to EPA's specific comments for Goldendale Generating Station, Industrial Section source test results, D&L Foundry, and REC. Those comments are offered below:

The FCE for Goldendale Generating Station, dated 8/31/11 was not entered in AFS.
This is partially correct. Ecology completed a FCE for Goldendale Generating Station on 10/19/11; the date of last document review was 8/31/11. Ecology listed the date completed in the AFS entry, which was contrary to Ecology's normal protocol (but not specified in any federal protocol that we know of) and affected which Federal Fiscal Year (FFY) the FCE was associated with. The error was pointed out by Rindy Ramos during the SRF audit. Ecology corrected the date to 8/31/11 in AFS, on 11/14/12.

An offsite FCE for SDS Lumber, dated 3/29/11 is entered in AFS. Documentation in the file indicates that an onsite PCE was conducted on that date.

This is correct. The offsite FCE was entered by Laurie Kral, EPA Region 10, while she was helping us document a federally reportable violation (see attached email). Ecology did not notice that she had specified an offsite FCE instead of an onsite PCE (compliance inspection). Ecology corrected the classification to PS – "S&L PCE-Onsite" in AFS on 1/9/13.

Ecology's Industrial Section receives Monthly Air Reports from the aluminum and pulp and paper facilities it regulates. These reports contain a summary of any source testing that is required for a given month. Compliance information (source test results) is entered into a facility Compliance Monitoring Worksheet (CMS). The actual source test reports are not retained in the Compliance and Enforcement files.

One of the items to consider in evaluating the accuracy of MDRs is whether or not the date a source test is conducted is accurately entered in AFS. Since a copy of the source test was not available for review, and the date a source test is conducted is not entered on the CMS, the reviewer was unable to verify the source test dates in AFS. This problem applied to: Alcoa Wenatchee Works, Kimberly Clark Tissue Company, Longview Fibre, and Simpson Tacoma Kraft Co.

Ecology's Industrial Section understands the need for EPA to be able to verify the accuracy of information entered into AFS. However, this finding is confusing because, with the possible exception of Alcoa Wenatchee, the information on stack test dates for the facilities noted was available in the Industrial Section's files at the time of EPA's review.

1. Ecology's Industrial Section receives and retains source test data (including test date information) in two ways: it is either summarized and included with the certified Air Monthly Report from the facility or it is sent as a report from the testing company under separate cover. Either way, this information is certified by the facility and retained in our files according to our agency's approved records retention schedule.

The Industrial Section's facility engineers review the stack test data and enter the results and test dates onto a compliance monitoring spreadsheet (CMS) for each facility on a monthly basis. The CMS is used to track compliance at each facility and are stored electronically on the Industrial Section's SharePoint site until an FCE is due. When an FCE is due for a facility, the CMS is printed and becomes part of the documentation of the FCE that is sent to the files. The data entered on the CMS is also used by the Section's Data Steward to populate the AFS database.

The EPA staff conducting the review may not have understood the Industrial Section's process for reviewing air data or the location of the stack test data in the files. We recommend a follow-up conversation with EPA staff prior to finalizing the SRF report in order to explore the Section's current practice and determine if this finding is valid. This discussion will also help Ecology better understand EPA's needs so that any valid issues may be appropriately addressed.

(EPA Note: The "Explanation" above for source test data was partially changed based on follow-up communications with Ecology.)

D&L foundry – source test dated 8/12/11 not entered into AFS
REC – NOV 8031 dated 10/26/10, AFS entry dated 11/26/10
REC – NOP 8256 dated 2/3/11, AFS entry dated 3/3/11.

One person enters all of the MDR's for ERO's 14 SM80's and 12 Air Operating Program (AOP) sources. All of the items listed above are similar in that they were not originated by the AFS entry person. Ecology has two suggestions to increase accuracy: 1) use an AFS entry worksheet with required MDR information, give to AFS entry person who enters the MDR's into AFS, and return the AFS worksheet for filing in source file;

and 2) have an additional person available for AFS entry. Note that all three of these sources were SM80's during the time period reviewed.

Actions taken to correct the identified issues:
The AFS date for REC Notice of Violation (NOV) #8031 has been changed to 10/26/10
REC – Notice of Penalty (NOP) 8256. AFS action #0042 is the penalty action (IN); the date of 3/3/11 is the date the penalty was paid. This AFS entry references comment 001-C which states "NOP 8256 issued 2/3/11 for NOV 8031 issued 10/26/10." No corrections have been made to this entry. (EPA Note: See Description section above regarding the correct MDR date.) D&L foundry source test data has been entered into AFS

Wherever possible, the historical data has been updated in AFS. Ecology will develop and submit a plan to meet the EPA's goals of improving data quality of MDR's entered into AFS. That plan will be submitted within 60 days of the final SRF report.

Recommendation

By November 1, 2013, Ecology shall develop a plan for improving the integrity of MDR data entry into AFS and submit the plan to EPA-R10. The plan shall include a process to correct deficiencies found during the review and a process to ensure continuous and accurate MDR data reporting in the future. The plan shall include a schedule for implementation and fully describe the effort necessary to ensure accurate data entry into AFS. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding 3-1	**Area for State Improvement**
Description	Minimum Data Requirements (MDRs) are not entered in a timely fashion.
Explanation	This represents the number of days between the action "Date Achieved" and the "Date Created" in AFS. With the exception of stack tests, MDRs must be reported in AFS within 60 days of the date of the event. Ecology is below the national goal and national average for all of the metrics listed below. Ecology directly enters all MDRs into AFS. They enter this information as it occurs – they do not have a set frequency. EPA's regional office maintains the rights to add, delete, etc., HPV flags within AFS. EPA receives HPV updates as activities as they occur or during the bimonthly HPV calls. Note: Each of the three regional offices reviewed have their own AFS data managers that directly enter MDR activities into AFS. The procedure by which each regional data manager is notified of completion of MDR activities varies. The timely entry of MDRs is not a current priority with Ecology. Since Ecology has its own data "System of Record," direct entry of MDRs into AFS is viewed as a duplication of work. Resource constraints and workload priorities are two other reasons MDR data entry is not a high priority for Ecology.
Relevant metrics	Data Metric 3b1 – Timely Reporting of Compliance Monitoring Minimum Data Requirements – Ecology = 68.75%, Goal = 100%, National average =78.6%. Data Metric 3b2 – Timely Reporting of Stack Test Minimum Data Requirements – Ecology = 33.13%, National goal = 100%, National average = 75.5%. Data Metric 3b3 – Timely Reporting of Enforcement Minimum Data Requirements – Ecology = 13.33%, National goal = 100%, National average = 76.1%.
State response	Wherever possible, the historical data has been updated in AFS. Even though the May 30, 2003 Washington State Compliance Assurance Agreement for Air Programs requires quarterly reporting of AFS information, we recognize that the Air Facility System (AFS) Business

Rules Compendium requires reporting to AFS within 60-days of the event. Ecology's goal is to prevent health impacts to the citizens in the state of Washington and to correct any compliance issues as quickly as possible. As with all the states, we are resource limited and we apply our resources where we think we will get the biggest benefit. Entering data into an EPA database late is a priority of ours but maintaining clean healthy air for the citizens of the state of Washington is a bigger priority of Ecology's Air Quality Program.

Ecology will develop and submit a plan to meet the EPA's goals of improving data quality of MDR's entered into AFS. That plan will be submitted within 60-days of the final SRF report.

Recommendation

By November 1, 2013, Ecology shall develop a plan for improving the timeliness of MDR data entry into AFS and submit the plan to EPA-R10. The plan shall include a workload analysis that describes the effort necessary, including the need for any additional resources (i.e., FTE), to ensure the data are entered timely. The plan shall also include a schedule for implementation of timely data entry. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in state/EPA agreements.

Finding 4-1	**Meets Expectations**
Description	Ecology met its traditional FY11 CMS plan and its PPA commitments.
Explanation	Traditional CMS Plan Ecology committed to conduct FCEs for 10 of its CMS majors during FY11. Ecology met that commitment and conducted all scheduled FCEs. Ecology committed to conduct 10 FCEs at its SM80 sources. Ecology met that commitment and conducted all scheduled FCEs. Performance Partnership Agreement (PPA) The PPA references a May 30, 2003, CAA Compliance Assurance Agreement. The following is a brief description of its major commitments. 1) Ecology committed to submit a CMS Plan for FY11 which they did and it was approved by EPA. Ecology met 100% of the plan commitments. 2) Ecology committed to follow EPA's 'Timely and Appropriate Enforcement Response to High Priority Violations" policy, to recover economic benefit of noncompliance when penalizing violators, and to assess gravity as allowed by State law. Eighty percent of Ecology's HPV determinations were accurately made and all of their penalty calculations reviewed considered gravity and economic benefit. 3) Ecology committed to maintain AFS by entering the required MDRs into AFS. They did enter the majority of MDRs however they were not submitted timely – within 60 days of occurrence.
Relevant metrics	File Metric 4a1 - Planned evaluation completed: Title V Major FCEs – Ecology - (10/10) = 100%, Goal = 100% File Metric 4a2 – Planned evaluation completed: SM-80 FCEs – Ecology (10/10) = 100%, Goal = 100%. File Metric 4b – Planned commitments completed: PPA – Ecology (3/3) = 100%, Goal = 100%
State response	
Recommendation	None required.

Element 5 -- Inspection Coverage: Completion of planned inspections.

Finding 5-1	**Meets Expectations**
Description	Ecology met the negotiated frequency for compliance evaluations for each CMS source and reviewed Annual Compliance Certifications for 96.15% of its active Title V sources.
Explanation	Ecology completed all planned inspections during the review period. They committed to perform FCEs at 10 of their major sources and FCEs at 10 of their SM80 sources.
Relevant metrics	Data Metric 5a - FCE Coverage Major – Ecology (10/10)=100%, Goal = 100% Data Metric 5b – FCE C0verage SM-80 (Corrected data) – Ecology (10/10) = 100%, Goal = 100% Data Metric 5e – Review of Title V Annual Compliance Certifications Completed –Ecology (25/26) = 96.15%, Goal = 100%
State response	
Recommendation	None required.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding 6-1	**Meets Expectations**
Description	Compliance monitoring activities by Ecology's inspectors are meeting the definition of full compliance evaluations (FCEs).
Explanation	All but one of Ecology's compliance monitoring reports (CMRs) reviewed provide sufficient documentation to determine facility compliance. The inspection reports reviewed were generally thorough and provided all documentation necessary to determine compliance at the facility. The documentation was sufficient enough for the file reviewers to determine that the inspection met the requirements for an FCE per the Compliance Monitoring Strategy (CMS). The FCE report for Genie Industries was not found in the source file. AFS indicated that an FCE had been conducted on September 26, 2011; however, documentation of an FCE for that date was not found.
Relevant metrics	File Metric 6a – Documentation of FCE Elements – Ecology - (8/9) = 88.9%, National Goal = 100% File Metric 6b – Compliance Monitoring Reports or Source Files Reviewed That Provide Sufficient Documentation to Determine Compliance by the Source – Ecology (13/14) = 92.9%, National Goal = 100%
State response	Two letters in Genie's source file referenced an on-site inspection conducted on 9/26/11. ERO has traditionally documented a facility compliance evaluation in a letter to the source documenting Ecology's review and findings. EPA may not consider these letters from Ecology complete documentation of an FCE. Ecology will consider using a standard format to document FCE's that includes the information required in EPA's Compliance Monitoring Strategy, in addition to sending the facility a letter.
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-1	**Meets Expectations**
Description	Percentage of CMRs of facility files reviewed that led to accurate compliance determinations.
Explanation	There are two aspects considered under Element 7. Finding 7-1 is for the file review metric 7a. Fourteen of the fifteen files reviewed contained an accurate compliance determination and all of the CMRs met the requirements delineated in Section IX of EPA's 2001 CMS policy. One violation was not properly identified as an HPV. See Element 8 for further information. Lack of proper identification of HPVs is a concern for EPA. However, since Ecology took a formal enforcement action against the source, which was timely (within 270 days) and appropriate, EPA does not consider this particular instance a significant issue. All CMRs contained general facility information and a description of regulated emission units and processes, a description of compliance monitoring activities, a compliance enforcement history and observations and supporting documentation. The majority of reports contained a facility inventory.
Relevant metrics	File Review Metric 7a, Accuracy of Compliance Determinations – Ecology (14/15) = 93.3%, National Goal = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-2	Area for State Improvement
Description	The majority of Tier 1 sources that received a notice of violation (informal enforcement action) during the review year did not have their compliance status changed to either "in violation" or "meeting compliance schedule."
Explanation	There are two aspects considered under Element 7. Finding 7-2 is for the data metrics 7b1 and 7b3. Data metric 7b3 assesses whether compliance status (either "in violation" or "meeting compliance schedule") is updated for HPVs. No HPVs were identified by Ecology in FY 2011; therefore compliance status was appropriately not changed for 7b3. Data metric 7b1 assesses whether compliance status is updated for informal enforcement actions taken against Tier 1 sources. In 2004, EPA-R10 made a conscious decision to disinvest from continually updating compliance status for informal enforcement actions based on the Region's inadequate resources to accomplish the time-intensive entry of this one frequently changing data point, the relatively lesser value of this data point in program implementation, and the priority to focus resources on HPVs. Knowing that State and LAA programs in R10 were similarly challenged to provide data entry resources, R10 did not advocate for continual update of compliance status for informal actions by States or LAAs. Recently, EPA-OECA required R10 to develop a plan to address this data deficiency; Region 10 agreed. While OECA and R10 agreed that Element 7-2 should be rated "Area for ***Regional*** Improvement," the report template drop down menu does not allow this selection. Thus, although R10 has taken full responsibility for this practice and had expected to remedy this issue outside of SRF, we had to default to a rating of "State Improvement." As this is intended as an Area for Regional Improvement, the recommendation pertains to Region 10 actions.
Relevant metrics	Data Metric 7b3 - Violations Reported Per HPV Identified - Ecology = 0/0, National Goal =100%, National Average = 69.6% Data Metric 7b1 - Alleged Violations Reported Per Informal Enforcement Actions (Tier I only) – Ecology (0/7) = 0%, National Goal = 100%, National Average = 62.2%
State response	Ecology addresses all informal and formal enforcement actions at SM80

and Title V sources including identifying HPVs, and entering actions into AFS. Similar to EPA, Ecology has made a conscious decision to disinvest from continually updating compliance status for informal enforcement actions based on inadequate resources to accomplish the time-intensive entry of this one frequently changing data point. We will however participate in an EPA-sponsored training when it becomes available.

Recommendation By May 31, 2013, Region 10 will submit a plan to OECA that presents a timeline for the Region to enter R10 data for metric 7b1, communicate with States and LAAs regarding this data need, and provide training to States and LAAs for their data entry.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding 8-1	**Area for State Attention**
Description	All of the compliance determinations made, except for one, were accurately determined not to be an HPV.
Explanation	Of the seven enforcement actions reviewed, one was not reported to EPA and therefore not entered into AFS as an HPV. Unreported HPV: On April 27, 2011, a Notice of Violation Docket # 8486 was issued to Simpson Tacoma Kraft Company for violating the CO 30-day rolling average emission limit for Power Boiler (PB) #7. This violation falls under Matrix Criterion 4: CEM Detected Violation of EPA's HPV policy. In accordance with Table 4-4: Matrix Criterion 4 of EPA's HPV Workbook dated June 23, 1992, "any violation of a standard for which the averaging period is more that 24 hour is an automatic HPV, without consideration of the level or duration of the violation." Since the boiler's CO emission limit is a 30-day rolling average, it is by default covered by Criterion 4 and should have been reported as an HPV. NOTE: Element #8 also evaluates the timely entry into the national database of HPV MDRs. During the review year, Ecology did not report addressing any old HPVs (Pre-FY11) or discovering any new HPVs. Therefore EPA is unable to evaluate this MDR in regards to timeliness. It is important to note that Ecology did address, in a timely manner, the unreported HPV discussed above.
Relevant metrics	File Metric 8c – Accuracy of HPV Determinations – Ecology (6/7) = 85.7%, National Goal = 100%. Data Metric 3a2 – Untimely Entry of HPV Determinations –Ecology 0, National Goal = 0 (Ecology did not enter any HPV determinations).
State response	Ecology has no response to this Finding.
Recommendation	None required.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding 9-1	**Meets Expectations**
Description	Enforcement actions include corrective action that results in facilities returning to compliance.
Explanation	Five formal enforcement actions were taken that included corrective action(s) designed to return the source to compliance in a timely manner. However, in several cases the formal action consisted of a penalty only action because the facility had already returned to compliance.
Relevant metrics	File Metric 9a – Formal Enforcement Responses that Include Required Corrective Action that will Return the Facility to Compliance in a Specified Time Frame – Ecology (5/5) = 100%, National Goal = 100%.
State response	
Recommendation	None required.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding 10-1	**Meets Expectations**
Description	The Agency addressed an Unreported HPV in a timely and appropriate manner.
Explanation	This element measures the percentage of HPV addressing actions that meet the timeliness standard in EPA's "Timely and Appropriate Enforcement Response to High Priority Violations Policy." The Element also measures the percentage of HPVs reviewed where the violation was appropriately addressed. As discussed in Element 8, Ecology did not report any HPV activities in FY11 but there was an Unreported HPV that was addressed timely and appropriately.
Relevant metrics	File Metric 10a – Timely Action Taken to Address HPV's –Ecology (1/1) = 100%, National Goal = 100%, National Average = 63.7%. File Metric 10b – Appropriate Enforcement Responses for HPVs – Ecology (1/1) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding 11-1	**Meets Expectations**
Description	Ecology is considering and including, where appropriate, gravity and economic benefit.
Explanation	Ecology is assessing and collecting penalties for violations. They use a "Civil Penalty Worksheet" and a "Gravity Criteria Scoring Worksheet" to calculate the appropriate penalty amount for assessment of a civil penalty for violations of Agency regulations or permits. All of the penalties considered, but did not necessarily include, economic benefit. When economic benefit is assessed, it is Ecology's policy to use the BEN model. Even though the worksheets include a space to record the economic benefit component of a penalty and the worksheets did include documentation as to whether or not economic benefit was considered, the documentation supporting the exclusion of economic benefit was very limited.
Relevant metrics	File Metric11a – Penalty Calculations Reviewed that Consider and Include Gravity and Economic Benefit – Ecology (5/5) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding 12-1	**Meets Expectations**
Description	Sufficient documentation was found to determine that Ecology is collecting all penalties assessed.
Explanation	The file contained information to determine that all five penalties assessed were collected. A copy of the payment or a notification from Ecology's fiscal office was found in the files for all penalties collected. Element 12 also measures the percentage of penalties reviewed that document the rationale for the final value assessed compared to the initial value assessed. In FY11, for all five of the penalties assessed by Ecology, the initial amount assessed was the final amount paid.
Being Relevant metrics	File Metric 12a – Documentation of Difference Between Initial and Final Penalty and Rationale – Ecology (5/5) = 100%, National Goal = 100% File Metric 12b – Penalties collected – Ecology (5/5) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Puget Sound Clean Air Agency

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding 1-1	**Meets Expectations**
Description	The data in the national database are complete.
Explanation	Element 1 includes all the data verification metrics. This element measures whether reporting of Minimum Data Requirements (MDRs) into AFS is complete at the time the data are pulled from AFS for use in the SRF. Metrics are limited to stationary sources that compose the federally reportable universe and activities associated with them that occurred during the review year. A review of the data submitted to AFS to meet the minimum data requirements (MDR's) was completed. No significant discrepancies were found.
Relevant metrics	Data metric 1a1 Number of Active Major Facilities (Tier 1) – 34 Data metric 1a2 Number of Active Synthetic Minors (Tier 1) – 77 Data metric 1b4 Number of Active Federally-Reportable Title V Facilities – 30 Data metric 1c2 Number of FCEs at Tier 1 Facilities (Activity Count) – 113 Data metric 1f1 Number of HPVs Identified (Activity Count) – 2
State response	
Recommendation	None required.

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding 2-1	**Meets Expectations**
Description	Data reported in the national system are generally accurately entered and maintained.
Explanation	Of the 20 files reviewed; only one contained a minor data entry error. PSCAA's compliance and enforcement files are very well maintained and organized.
Relevant metrics	Data Review Indicator 2a– Major Sources Missing CMS Source Category Code – 0 File Metric 2b – Accurate MDR data in AFS (19/20) = 95% of files, Goal = 100%.
State response	
Recommendation	None required.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding 3-1	**Area for State Improvement**
Description	Minimum Data Requirements (MDRs) are not entered in a timely fashion.
Explanation	This represents the number of days between the action "Date Achieved" and the "Date Created" in AFS. PSCAA is below the goal and national average for most of the metrics listed below. PSCAA uploads into AFS all AFS MDRs monthly except for the flagging of HPVs. EPA's regional office maintains the rights to add, delete, etc., HPV flags within AFS. PSCAA provides EPA with monthly HPV updates to be entered into AFS by EPA. At the time of the file review, EPA and PSCAA discussed this issue. PSCAA's initial opinion was that there may be an uploading (programming) timing issue between when they enter information into their system and when the data are uploaded into AFS. They were going to explore this possibility further.
Relevant metrics	Data Metric 3b1 – Timely Reporting of Compliance Monitoring Minimum Data Requirements – PSCAA = 39.9%, Goal = 100%, Nat'l avg =78.6%. Data Metric 3b2 – Timely Reporting of Stack Test Minimum Data Requirements – PSCAA = 43.1%, Goal = 100%, Nat'l avg = 75.5%. Data Metric 3b3 – Timely Reporting of Enforcement Minimum Data Requirements – PSCAA = 86.6%. Goal = 100%, Nat'l avg = 76.1%.
State response	(EPA Note: The following response is excerpted from PSCAA's response letter. The full letter is included as Appendix H.) With respect to the timely reporting of MDRs, we were surprised that the SRF findings concluded the agency's reports were not considered timely. Approximately a decade ago, we were reporting MDRs on a quarterly basis in coordination with EPA input. When the EPA concluded that quarterly was not sufficient, we updated our procedures to report on a monthly frequency and have done so since October 2004. The last SRF report (from 2008) had no concerns about the timeliness of the agency's data submittals. This finding has led the agency to further analyze why our monthly reporting system is not meeting EPA's data needs. The agency's current compliance systems are designed to ensure high quality documentation and

decision making, and avoid rework. The agency's compliance reporting review system is structured to ensure every compliance report submitted by a source is reviewed. This review process includes review by the assigned engineer, assigned inspector, supervising inspector, and compliance systems staff person. Each reviewer has a different role and responsibility. These steps are only for the report review; enforcement actions trigger additional processes within our Compliance Division. The report review work is all completed and logged into our compliance database to support easy uploading of the MDR information to EPA's AFS database.

As stated in the Draft Report, during the file review, the agency indicated there may be an uploading (programming) timing issue between when information is entered into the agency's system and when data is uploaded into AFS. We have been investigating this timing issue and will continue to consider this part of our system during our response to address this finding. This report review system was developed to ensure reviews were completed and that the compliance data was accurate and complete prior to uploading any information to AFS. Data is uploaded monthly, and the data for each month is submitted 30 days after the end of the reported month (e.g. April's data is uploaded at the end of May). This reporting sequence was selected to ensure the reported data was stable (no changes to be made after uploading to EPA) and to provide time for enforcement action initiated in that month to be completely data entered.

We agree with the recommendation in the Draft Report, that within 60 days of receiving the final SRF report, the agency will propose a plan for improving the timeliness of MDR data entry into AFS. This will include a report on how data will be entered in a timely fashion to meet MDR requirements, an implementation schedule, and the effort required to implement this effort. We may be able to shorten the wait time for data stabilization immediately prior to uploading. Possible future changes to assist with faster uploading of data to EPA will have to be weighed against the risks to data quality. Also, although the Draft Report mentions including a work load analysis as part of the plan, this may not be necessary or appropriate given that work load issues may not be the real cause of this finding. (EPA Note: Per this PSCAA comment, workload analysis has been dropped from the Recommendation.)

Recommendation By November 1, 2013, PSCAA shall develop a plan for improving the timeliness of MDR data entry into AFS and submit the plan to EPA-R10. The plan shall include an evaluation of current procedures and a schedule for implementation of timely data entry. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in state/EPA agreements.

Finding 4-1	**Meets Expectations**
Description	PSCAA met its FY11 CMS commitments.
Explanation	It is PSCAA standard operating practice to conduct FCEs at all of their Title V major sources and SM80 sources on an annual basis. The CMS policy only requires that a FCE be conducted at a major source every two years and at a SM80 source every 5 years. PSCAA committed to perform 33 FCEs at its Title V major sources. They performed 36 (during FY11, 3 additional Title V sources were added to the universe of sources for which they conducted a FCE). PSCAA committed to perform 14 FCEs at its SM80 sources. However, they performed FCEs at all of their SM80 sources for a total of 72 FCEs.
Relevant metrics	File Metric 4a1 - Planned evaluation completed: Title V Major FCEs – (36/33) = 109.1%, Goal = 100% File Metric 4a2 – Planned evaluation completed: SM-80 FCEs – (72/14) = 514.3%, Goal = 100%.
State response	
Recommendation	None required.

Element 5 -- Inspection Coverage: Completion of planned inspections.

Finding 5-1	**Meets Expectations**
Description	PSCAA met the negotiated frequency for compliance evaluations for each CMS source and reviewed Annual Compliance Certifications for 100% of its active Title V sources.
Explanation	PSCAA completed all planned inspections during the review period. They committed to perform FCEs at 33 of their major sources and FCEs at 73 of their SM80 sources.
Relevant metrics	Data Metric 5a - FCE Coverage Major – (33/33) =100%, Goal = 100% Data Metric 5b – FCE C0verage SM-80 – (73/73) = 100%, Goal = 100% Data Metric 5e – Review of Title V Annual Compliance Certifications Completed – (30/30) = 100%, Goal = 100%
State response	
Recommendation	None required.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding 6-1	**Meets Expectations**
Description	Compliance monitoring activities by PSCAA's inspectors are meeting the definition of full compliance evaluations (FCEs).
Explanation	All of PSCAA's compliance monitoring reports (CMRs) reviewed provide sufficient documentation to determine facility compliance. The inspection reports reviewed were thorough and provided all documentation necessary to determine compliance at the facility. The documentation was sufficient enough for the file reviewers to determine that the inspection met the requirements for an FCE per the Compliance Monitoring Strategy (CMS).
Relevant metrics	File Metric 6a – Documentation of FCE Elements – PSCAA (19/19) = 100%, National Goal = 100% File Metric 6b – Compliance Monitoring Reports or Source Files Reviewed That Provide Sufficient Documentation to Determine Compliance by the Source – PSCAA (19/19) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-1	Meets Expectations
Description	Percentage of CMRs of facility files reviewed that led to accurate compliance determinations.
Explanation	There are two aspects considered under Element 7. Finding 7-1 is for the file review metric 7a. All files reviewed contained accurate compliance determination. All of the CMRs met the requirements delineated in Section IX of EPA's 2001 CMS policy. All CMRs contained general facility information and a description of regulated emission units and processes, a description of compliance monitoring activities, a compliance enforcement history and observations and supporting documentation. The majority of reports contained a facility inventory.
Relevant metrics	File Review Metric 7a, Accuracy of Compliance Determinations – PSCAA (20/20) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-2	Area for State Improvement
Description	The majority of Tier 1 sources that received a notice of violation (informal enforcement action) during the review year did not have their compliance status changed to either "in violation" or "meeting compliance schedule."
Explanation	There are two aspects considered under Element 7. Finding 7-2 is for the data metrics 7b1 and 7b3. Data metric 7b3 assesses whether compliance status (either "in violation" or "meeting compliance schedule") is updated for HPVs. In FY 2011, PSCAA found one HPV. Compliance status was appropriately updated within the requisite 60 days. Data metric 7b1 assesses whether compliance status is updated for informal enforcement actions taken against Tier 1 sources. In 2004, EPA-R10 made a conscious decision to disinvest from continually updating compliance status for informal enforcement actions based on the Region's inadequate resources to accomplish the time-intensive entry of this one frequently changing data point, the relatively lesser value of this data point in program implementation, and the priority to focus resources on HPVs. Knowing that State and LAA programs in R10 were similarly challenged to provide data entry resources, R10 did not advocate for continual update of compliance status for informal actions by States or LAAs. Recently, EPA-OECA required R10 to develop a plan to address this data deficiency; Region 10 agreed. While OECA and R10 agreed that Element 7-2 should be rated "Area for ***Regional*** Improvement," the report template drop down menu does not allow this selection. Thus, although R10 has taken full responsibility for this practice and had expected to remedy this issue outside of SRF, we had to default to a rating of "State Improvement." As this is intended as an Area for Regional Improvement, the recommendation pertains to Region 10 actions.
Relevant metrics	Data Metric 7b3 - Violations Reported Per HPV Identified - PSCAA (1/1) =100%, National Goal =100%, National Average = 69.6% Data Metric 7b1 - Alleged Violations Reported Per Informal Enforcement Actions (Tier I only) – PSCAA (6/36) = 16.7%, National Goal = 100%, National Average = 62.2%
State response	(EPA Note: The following response is excerpted from an email response

from PSCAA.)

The recommended response to the finding is to shift the understanding of the MDR requirement to match EPA-HQ's view and at the same time, move that expanded view and associated work to the state and local agencies. It appears that the EPA Region 10 response to this finding is, following training, that the Region 10 staff will no longer be setting the HPV flags in AFS for sources in our jurisdiction. (EPA Note: R10 subsequently clarified for PSCAA that HPV tracking will be maintained by R10.) That will be in addition to the other violation information identified and other information on compliance status. With that understanding, we would suggest two things be considered:

1. The training that EPA Region 10 identified (in the June 5, 2013 letter) they will provide would best be conducted in a coordinated and common manner with all affected agencies getting the same training and understanding together. If Region 10's role in the past helped with consistency and common interpretations, then this transfer of responsibilities deserves the best chance for consistent implementation by everyone getting the same information. This also would allow everyone to benefit from other's questions that may arise.
2. Please consider that the discussion of MDRs is still underway at EPA headquarters with state and local agencies still providing EPA input on the topic through NACAA. On June 24th, there was a national conference call to hear a presentation prepared by Crystal Rau at Ecology. I'm attaching a copy of the information that was distributed for that call for your reference. During that call, I heard a number of states indicate that they believed EPA staff were in agreement that the compliance status flag was not going to be included as an MDR as we moved forward. I don't know where the final decision on that lies, but it would be unfortunate if we were training on a data entry element that is possibly being actively discussed for change.

PSCAA is not sure how to assess Region 10's recommendation on our workload until we better understand the details during training.

Recommendation By May 31, 2013, Region 10 will submit a plan to OECA that presents a timeline for the Region to enter R10 data for metric 7b1, communicate with States and LAAs regarding this data need, and provide training to States and LAAs for their data entry.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding 8-1	**Meets Expectations**
Description	Accurate HPV determinations are being made and entered into AFS timely.
Explanation	Enforcement actions reviewed during the file review process confirmed PSCAA is making accurate HPV determinations. Of the 13 violations reviewed, all HPV violations were accurately identified. HPV determinations are being timely entered into AFS.
Relevant metrics	File Metric 8c – Accuracy of HPV Determinations – PSCAA (13/13) = 100%, National Goal = 100%. Data Metric 3a2 – Untimely Entry of HPV Determinations – PSCAA 0, National Goal = 0.
State response	
Recommendation	None required.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding 9-1	**Meets Expectations**
Description	Enforcement actions include corrective actions that result in facilities returning to compliance.
Explanation	Nine formal enforcement actions were taken that included corrective action(s) designed to return the source to compliance in a timely manner. In several cases the formal action consisted of a penalty only action because the facility had already returned to compliance. One of the nine violations was addressed and resolved outside of the review period (FY11). A Notice of Civil Penalty was issued on November 15, 2012, to Saint Cobain Containers (Verallia) for a violation that occurred during FY11.
Relevant metrics	File Metric 9a – Formal Enforcement Responses that Include Required Corrective Action that will Return the Facility to Compliance in a Specified Time Frame – PSCAA (9/9) = 100%, National Goal = 100%.
State response	
Recommendation	None required.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding 10-1	**Area for State Improvement**
Description	The Agency is taking appropriate but untimely enforcement actions to address HPVs.
Explanation	This element measures the percentage of HPV addressing actions that meet the timeliness standard in EPA's "Timely and Appropriate Enforcement Response to High Priority Violations Policy." Enforcement files which contained an HPV activity that occurred in FY11, (e.g., the determination of day zero, an addressing action, or a resolving action), were reviewed. Of the six files that contained a HPV addressing action, only one violation was addressed within 270 days per EPA's timely and appropriate HPV policy. A contributing factor to PSCAA's inability to meet EPA's timeliness policy is the fact that they regulate many complex facilities and issue numerous informal and formal actions. Of the files reviewed, one contained a violation that was addressed in 288 days, another action addressed long term compliance issues with a County wastewater treatment facility, and another action addressed multiple violations at the facility. All of the six files reviewed contained an appropriate enforcement action. One of the files contained an addressing action that was issued in FY12 – outside of the FY11 review year. The action was untimely; however, it was appropriate. It was a penalty-only action because the facility had already returned to compliance by the addressing date.
Relevant metrics	File Metric 10a – Timely Action Taken to Address HPVs – PSCAA (1/6) = 16.7%, National Goal = 100%, National Average = 63.7%. File Metric 10b – Appropriate Enforcement Responses for HPVs – PSCAA (6/6) = 100%, National Goal = 100%
State response	(EPA Note: The following response is excerpted from PSCAA's response letter. The full letter is included as Appendix H.) With respect to the timely resolution of HPV cases, we will carefully review the details of the cases identified as late and provide more input in the final report prepared in relation to this finding. It is important to remember that there are several process steps available to sources during

the enforcement process. Thus, we are not fully in control of the schedule throughout those processes. As has been identified in the draft report, many of our HPV cases are complex and consist of multiple notices of violation over several months that are all the same case.

We agree with the recommendation in the Draft Report that, within 60 days of receiving the final SRF report, the agency will prepare a report for EPA's review. The report will delineate the actions the agency can take to address HPVs in a timely manner, an implementation schedule, and the effort required to meet this schedule. Also, although the Draft Report mentions conducting a work load analysis as part of responding to this finding, this may not be necessary or appropriate given that work load issues may not be the real cause of this finding.

Recommendation

By November 1, 2013, PSCAA will conduct a workload analysis (if needed) and prepare a plan for EPA's review. The plan shall delineate the actions PSCAA can take to address HPVs in a timely manner consistent with EPA's HPV policy. The analysis shall include a schedule for implementation and describe the effort necessary to ensure HPVs are addressed timely. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Note: Per PSCAA's comment above, EPA defers to PSCAA that a workload analysis may not be needed. Whether a workload analysis is needed will be determined once PSCAA further investigates the issue.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding 11-1	**Meets Expectations**
Description	PSCAA is considering and including, where appropriate, gravity and economic benefit.
Explanation	PSCAA is assessing and collecting penalties for violations. They use a "General Civil Penalty Worksheet and Recommendation" worksheet to make a recommendation for assessment of a civil penalty for violations of Agency regulations or permits. All of the penalties considered, but did not necessarily include, economic benefit. When economic benefit is assessed, it is PSCAA's policy to use the BEN model. Even though the worksheets include a space to record the economic benefit component of a penalty and the worksheets did include documentation as to whether or not economic benefit was considered, the documentation supporting the exclusion of economic benefit was very limited.
Relevant metrics	File Metric11a – Penalty Calculations Reviewed that Consider and Include Gravity and Economic Benefit - PSCAA (7/7) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding 12-1	**Meets Expectations**
Description	PSCAA documents all adjustments made to assessed penalties.
Explanation	For the two cases in which the initial assessed amount and the amount collected differed, documentation for the difference was contained in the source file. For the other four files, the initial amount assessed and the amount collected was the same amount. All penalties assessed were collected. A copy of the payment was found in the files for all penalties collected.
Relevant metrics	File Metric 12a – Documentation of Difference Between Initial and Final Penalty and Rationale – PSCAA (6/6) = 100%, National Goal = 100% File Metric 12b – Penalties collected – PSCAA (7/7) = 100%, National Goal = 100%
State response	
Recommendation	None required.

Southwest Clean Air Agency

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding 1-1	**Meets Expectations**
Description	The data in the national database are complete.
Explanation	Element 1 assesses the completeness of the data in the national data system (AFS) relating to the facility universe, number of enforcement actions, NESHAP subparts, etc. A review of the data submitted to AFS to meet the minimum data requirements (MDRs) was completed. No significant discrepancies were found.
Relevant metrics	See attached Data Metric Analysis for list of relevant metrics.
State response	
Recommendation	None required.

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding 2-1	**Area for State Improvement**
Description	Data reported in the national system are not always accurately entered and maintained.
Explanation	Of the 15 files reviewed, 6 contained minor data entry errors. The following is a list of the discrepancies found during the file review: WaferTech - Two source tests conducted in 2011 were not included in compliance history. Also, there were duplicate entries on the Detailed Facility Report (DFR). Emerald - Records for PCE on 5/19 and 5/28 were not found in the file. Hampton Lumber - Two entries on 11/3/2010. One is PCE one is FCE. No record for FCE found in file. Note: Agency is entering onsite FCE when onsite PCE and off site reviews are completed. Chehalis Power - No record of onsite FCE on 3/23/2011. Cardinal - One duplicate entry for a PCE on 5/4/2011. Hampton, Randle - No inspection report or note found associated with entry for PCE dated 9/8/2011. No EI or annual review with this date either. Sierra Pacific - No records for 5/11/2011 entry found. PCE date of 4/30/2011 may actually be 4/20/2011. Hardell - Entries on 5/5/2011 and 10/15/2010 seem to be duplicated. NOV date 4/5/2011 is not on DFR. Dates for 4852 NOC and NOV seem to be in error. Transalta - No documentation for entry dated 8/13/2011. Unable to verify what action occurred on 12/3/2010. As follow-up to SWCAA's comments ("State Response" entry below), EPA is working with SWCAA to clarify data entry errors, address the timeframe needed for data entry and verification before data are "frozen" for review, and develop procedures that will improve accuracy of data entry in the future. The plan for improving the integrity of data submitted should include the need for adequate documentation of FCEs.
Relevant metrics	2b - Accurate MDR data in AFS is 60% (9 of 15 files)
State response	General Response: SWCAA reports the data to the EPA Region 10 data steward for entry into AFS. During the data verification process all discrepancies between the data of record (on the Data Verification website http://www.epa-otis.gov/otis/srf) and the data that was reported to R-10 for entry into AFS, were documented in comments entered on the website and emailed to the R-10 data steward. Specific Response to Above Listed Discrepancies: WaferTech – Both source tests were reported to R-10 on 10-27-12. Emerald – PCEs on 5/10 and 5/26 were reported to R-10 on 10-27-12.

Hampton Lumber – SWCAA does not document an FCE as a discrete event, but reports it as the last of a series of PCEs required to complete the full compliance evaluation. For TV sources this typically includes an onsite inspection, semi-annual report review, annual certification review, and emission inventory validation. For the example in question the last of these PCEs was the semi-annual report review which was completed on 11-3-2010.
Chehalis Power – No actions were reported to R-10 with a date of 3/23/2011. The date reported for the FCE was 2/23/2011, which is the "Date of Report" on the inspection report in the SWCAA file.
Cardinal FG – Both the Annual Report Review and the Emission Inventory Validation were completed on 5/4/2011. Both are off-site partial compliance evaluations and were reported as such. This was not a duplicate entry.
Hampton Randle - 9/8/2011 is the "Date of Inspection" on the inspection report in the SWCAA file that corresponds to this PCE.
Sierra Pacific - No actions were reported to R-10 with a date of 5/11/2011. The PCE in AFS as 4/30/2011 was reported to R-10 as 4/20/2011.
Hardell – These are not duplicate entries. SWCAA reported an on-site inspection as 10/15/2010, an off-site report review as 5/5/2011, and an emission inventory validation as 5/5/2011. These three PCEs "rollup" to constitute an FCE, reported by SWCAA as 5/5/2011. The NOV dates reported to R-10 are confirmed to be correct.
TransAlta - No actions were reported to R-10 with a date of 8/13/2011. The date 12/3/2010 was reported to R-10 as the date NOV 4610 was resolved with the payment of the $1,500 civil penalty.

Recommendation

By November 1, 2013, SWCAA shall develop and submit to EPA a plan for improving the integrity of MDR data submitted to EPA Region 10 for entry into AFS. The plan shall include a process to correct deficiencies found during the review, including adequate documentation of completed FCEs, and a process to ensure continuous and accurate MDR data reporting to EPA Region 10 in the future. The plan shall include a schedule for implementation and fully describe the effort necessary to ensure accurate data are submitted to EPA Region 10. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding 3-1	**Area for State Improvement**
Description	Minimum Data Requirements are not entered in a timely fashion.
Explanation	This represents the number of days between the action "Date Achieved" and the "Date Created" in AFS. SWCAA is well below the goal and national average for each of the metrics listed below.
Relevant metrics	3b1 - The national goal for timely reporting of compliance monitoring MDRs is 100%. The national average is 78.6%. SWCAA is 13.2%. 3b2 - The national goal for timely reporting of stack tests and results is 100%. The national average is 75.5%. SWCAA is 24.4%. 3b3 - The national goal for timely reporting of enforcement MDRs is 100%. The national average is 76.1%. SWCAA is 10.3%.
State response	SWCAA has revised its procedures for recording and reporting CMS, stack test, and enforcement data in order to facilitate more frequent reporting to R-10 for entry into AFS. The EPA guidance regarding the "timeliness standard" for stack tests could be clarified. What is the MDR reportable action that starts the timeliness clock – the actual field testing event or SWCAA's report review and compliance determination? If the clock starts with the field event then 60 days is not reasonable because all SWCAA permits allow 45 days from the field test date before the report is due, leaving only 15 days for review documenting and reporting. If this is the case then 120 days is a more reasonable time frame. However, if the clock starts with SWCAA's review of the reported results, 60 days is doable. (EPA Note in response to the SWCAA suggestion for clarifying stack test data requirements: Per the 2012 ICR for AFS, the reportable action is the date of the stack test itself and the appropriate result code. These must be reported in AFS within 120 days of the stack test. Following SWCAA's suggestion, a letter was sent to R10 State and LAA Air programs on this.)
Recommendation	By November 1, 2013, SWCAA shall develop and submit to EPA a plan for improving the timeliness of MDR data submitted to EPA Region10 for entry into AFS. The plan shall include a workload analysis that describes the effort necessary, including the need for any additional resources (i.e., FTE), to ensure the data are submitted in a timely fashion in order to meet MDR requirements. The plan shall also include a schedule for implementation of timely data submittal. EPA shall review and concur or provide comments on the plan by December 16, 2013.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in state/EPA agreements.

Finding 4-1	**Meets Expectations**
Description	SWCAA is meeting CMS commitments.
Explanation	SWCAA committed to and completed 11 inspections at major stationary sources and 13 inspections at synthetic minor sources.
Relevant metrics	4a - Planned evaluation completed for the review year under a negotiated CMS. National goal = 100%. SWCAA = 100%
State response	
Recommendation	None required.

Element 5 -- Inspection Coverage: Completion of planned inspections.

Finding 5-1	**Meets Expectations**
Description	SWCAA met the negotiated frequency for compliance evaluations for each CMS source.
Explanation	SWCAA completed all planned inspections during the review period. SWCAA committed to and completed 11 inspections at major stationary sources and 13 inspections at synthetic minor sources.
Relevant metrics	5a - FCE Coverage Major and 5b - FCE Coverage SM-80. National goal is 100%. National averages are 90% and 90.6%, respectively. SWCAA's performance is 100%.
State response	
Recommendation	None required.

Element 5 -- Inspection Coverage: Completion of planned inspections.

Finding 5-2	Meets Expectations
Description	SWCAA is reviewing Title V annual compliance certifications received.
Explanation	(Note: Based on SWCAA's response, EPA changed this Finding from Area for State Attention in the draft report to Meets Expectations in the final report.) Records showed SWCAA reviewed all annual compliance certification required to be submitted during the review period. Per SWCAA's explanation ("State Response" entry below), Wafer Tech and Cardinal FG were issued Title V permits during the review period, and therefore Title V certifications for Cardinal FG and Wafer Tech were not required to be submitted during the review period.
Relevant metrics	5e – Review of Title V Annual Compliance Certifications Completed. The national goal is 100%. The national average is 72.5%. SWCAA is 8/8 = 100%.
State response	These two sources did not have a requirement to submit a Title V Annual Compliance Certification. During the review period they were new sources to the Title V program and were not yet required to have a Title V Permit. The requirement to submit the Title V Annual Compliance Certification originates with the final issuance of a Title V Permit. Cardinal FG has since been issued a Title V Permit, final on 9/27/2012, so its first Annual Compliance Certification was due on 3/15/2013. WaferTech has still not been issued a Title V Permit. Their application was due on 7/1/2012 and was determined complete on 6/8/2012.
Recommendation	None required.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding 6-1	**Meets Expectations**
Description	Compliance monitoring activities by SWCAA inspectors are meeting the definition of full compliance evaluations (FCE). Compliance monitoring reports (CMRs) reviewed provide sufficient documentation to determine compliance by the source.
Explanation	Inspection reports reviewed were thorough and provided all documentation necessary to determine compliance at the facility. Documentation was sufficient to determine inspections were meeting the requirements for an FCE, per the Compliance Monitoring Strategy (CMS).
Relevant metrics	6a – Documentation of FCE elements, 15/15 = 100%. 6b – Compliance monitoring reports or source files reviewed that provide sufficient documentation to determine compliance by the source, 15/15 = 100%.
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-1	**Meets Expectations**
Description	Percentage of CMRs of facility files reviewed that led to accurate compliance determinations.
Explanation	There are two aspects considered under Element 7. Finding 7-1 is for the file review metric 7a. All files reviewed showed accurate compliance determination.
Relevant metrics	File Review Metric 7a, Accuracy of compliance determinations, 15/15 = 100%
State response	
Recommendation	None required.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding 7-2	Area for State Improvement
Description	The majority of Tier 1 sources that received a notice of violation (informal enforcement action) during the review year did not have their compliance status changed to either "in violation" or "meeting compliance schedule."
Explanation	There are two aspects considered under Element 7. Finding 7-2 is for the data metrics 7b1 and 7b3. Data metric 7b3 assesses whether compliance status (either "in violation" or "meeting compliance schedule") is updated for HPVs. In FY 2011, SWCAA found one HPV. Compliance status was appropriately updated within the requisite 60 days. Data metric 7b1 assesses whether compliance status is updated for informal enforcement actions taken against Tier 1 sources. In 2004, EPA-R10 made a conscious decision to disinvest from continually updating compliance status for informal enforcement actions based on the Region's inadequate resources to accomplish the time-intensive entry of this one frequently changing data point, the relatively lesser value of this data point in program implementation, and the priority to focus resources on HPVs. Knowing that State and LAA programs in R10 were similarly challenged to provide data entry resources, R10 did not advocate for continual update of compliance status for informal actions by States or LAAs. Recently, EPA-OECA required R10 to develop a plan to address this data deficiency; Region 10 agreed. While OECA and R10 agreed that Element 7-2 should be rated "Area for ***Regional*** Improvement," the report template drop down menu does not allow this selection. Thus, although R10 has taken full responsibility for this practice and had expected to remedy this issue outside of SRF, we had to default to a rating of "State Improvement." As this is intended as an Area for Regional Improvement, the recommendation pertains to Region 10 actions.
Relevant metrics	Data Metric 7b3, Violations Reported Per HPV Identified, 1/1=100%; Goal is 100% of violations reported. Data Metric 7b1, Alleged Violations Reported Per Informal Enforcement Actions (Tier I only), 1/8 = 12.5%; Goal is 100% of violations.

State response

Recommendation By May 31, 2013, Region 10 will submit a plan to OECA that presents a timeline for the Region to enter R10 data for metric 7b1, communicate with States and LAAs regarding this data need, and provide training to States and LAAs for their data entry.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding 8-1	**Meets Expectations**
Description	Accurate HPV determinations are being entered into AFS, but the information is not being entered in a timely manner.
Explanation	Enforcement actions reviewed during the file review process confirmed SWCAA is making accurate HPV determinations. Therefore, the finding is "Meets Expectations." However, SWCAA is not entering data in a timely manner. This aspect is captured under Element 3 with a finding of "Area for State Improvement."
Relevant metrics	8c – Accuracy of HPV determinations – 100% 3b1 - The national goal for timely reporting of compliance monitoring MDRs is 100%. The national average is 78.6%. SWCAA is 13.2%. (3b1) 3b2 - The national goal for timely reporting of stack tests and results is 100%. The national average is 75.5%. SWCAA is 24.4%.(3b2) 3b3 - The national goal for timely reporting of enforcement MDRs is 100%. The national average is 76.1%. SWCAA is 10.3%. (3b3)
State response	
Recommendation	For timely data entry, see recommendation under Element 3.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding 9-1	**Meets Expectations**
Description	Enforcement actions include corrective action that result in facilities returning to compliance.
Explanation	Seven facility files with enforcement actions were reviewed. All seven contained some form of enforcement action that resulted in the facility returning to compliance in a timely fashion.
Relevant metrics	9a – Formal enforcement responses that included required corrective action that will return the facility to compliance in a specified time frame. 7/7=100%
State response	
Recommendation	None required.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding 10-1	**Meets Expectations**
Description	Timely and appropriate action is being taken by SWCAA.
Explanation	SWCAA addressed and resolved the two HPVs within the timeframes required by the "Timely and Appropriate Enforcement Response to High Priority Violations Policy."
Relevant metrics	10a – Timely action taken to address HPVs, 2/2=100% 10b – Appropriate Enforcement Responses for HPVs, 2/2=100%
State response	
Recommendation	None required.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding 11-1	Area for State Improvement
Description	SWCAA is assessing penalties according to local policy. Documentation describing the calculation methodology is inconsistent.
Explanation	SWCAA is assessing and collecting penalties for violations. Penalties reviewed included amounts for gravity and economic benefit. The penalty calculations reviewed for actions against WaferTech, Hardell Mutual Plywood Corp. and Transalta, Centralia likely included consideration of economic benefit per agency policy, but did not include documentation about whether economic benefit was considered in the penalty calculation. Local agency policy is to consider economic benefit during the penalty calculation phase.
Relevant metrics	11a – Penalty calculations reviewed that consider and include gravity and economic benefit. Three of the four actions reviewed did not include information about consideration of economic benefit.
State response	SWCAA has revised its enforcement documentation format to include a section requiring comment on the consideration of economic benefit.
Recommendation	By November 1, 2013, SWCAA shall incorporate an affirmative statement in all supporting documentation for penalty calculations that describes whether or not economic benefit was considered during the penalty assessment phase. SWCAA shall submit to EPA a copy of the statement or procedure as soon as possible but no later than November 1, 2013.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding 12-1	**Meets Expectations**
Description	SWCAA collected 100% of penalties assessed.
Explanation	SWCAA collected all penalties assessed for actions taken during the review period. No adjustments between initial and final penalty amounts were made.
Relevant metrics	12a – Documentation of difference between initial and final penalty and rationale. No adjustments were made between initial and final penalty assessment. 12b – Penalties collected. All penalties were collected.
State response	
Recommendation	None required.

Resource Conservation and Recovery Act Findings

Element 1 — Data Completeness: Completeness of Minimum Data Requirements.

Finding	**Meets Expectations**
Description	Ecology's hazardous waste data in RCRAInfo appear to be complete for the key data elements tracking compliance and enforcement.
Explanation	We examined current data in OTIS that were pulled from RCRAInfo along with frozen data from three prior years. Ecology's data were reported consistently and improved significantly in one area in fiscal year 2011. This improvement was in the RCRAInfo facility counts reported to the OTIS SRF data metrics. The total number of generators reported for fiscal years 2008 – 2010 was significantly higher than the actual number of generators in Washington State due to difficulties updating the data translation when merging Ecology's data with RCRAInfo. State efforts to improve data translation were successful in creating realistic generator counts for 2011.
Relevant metrics	Data metrics 1.a though 1.h (See Appendix A)
State response	Thank you. Staff at the Department of Ecology and the Washington State Department of Information Services in coordination with EPA staff will continue to improve the handler translation to accurately reflect the RCRAInfo regulatory universes in Washington state.
Recommendation	None required.

Element 2 — Data Accuracy: Accuracy of Minimum Data Requirements.

Finding	**Area for State Attention**
Description	There are infrequent discrepancies in the accuracy of some data that constitute a minor problem that Ecology's RCRA Program should correct.
Explanation	Data reported in OTIS from RCRAInfo showed 35 handlers with violations open more than 240 days without Return to Compliance or SNC designation. There were 19 violations from prior fiscal years and 16 in FY 2011. We expect that the prior year violations, dating back to FY 2006, are data problems that slipped through the system without timely resolution. The FY 2011 long standing violations amount to 5.8% of the 275 handlers with violations identified for the year, which generally meets SRF expectations. We also found infrequent discrepancies in the inspection and enforcement files where 10 of the 35 handlers had minor problems with the RCRAInfo data entered. While the file metric of 71% was below expectations, we did not find any patterns that would indicate a systemic problem with data accuracy. The data discrepancies were limited to mismatched inspection dates between the report and the RCRAInfo entry, a missing "referred to EPA" code, and different generator status in RCRAInfo compared with the inspection narratives (which could be due to the timing of the data pull as generators may notify the State at any time of their changes in status).
Relevant metrics	Data metric 2.a Long-standing secondary violators = 35 File metric 2.b Accurate entry of mandatory data (25/35) = 71.4%, Goal = 100%
State response	Ecology has examined the long-term violators list. As of the release date of the draft report, 26 of the 35 have since been RTC'd. Ecology has identified the problems that caused this issue. WA currently provides its regional offices with monthly lists of violations that are not RTC'd, and violations that have exceeded the scheduled RTC date by more than two months are flagged. We will continue this practice with additional managerial emphasis on violation resolution. WA will also begin using the OTIS SRF Metric 2.a, to identify long-term violators on a monthly basis. Responsibility for confirming or correcting the data will rest with the inspector and the inspector's direct supervisor.
Recommendation	None required.

Element 3 — Timeliness of Data Entry: Timely entry of Minimum Data Requirements.

Finding	**Meets Expectations**
Description	Ecology's entry of mandatory data was timely.
Explanation	The State is expected to maintain high performance.
Relevant metrics	File metric 3.a Timely entry of mandatory data (34/35) = 97.1%, Goal = 100%
State response	
Recommendation	None required.

Element 4 — Completion of Commitments: Meeting all enforcement and compliance commitments made in State/EPA agreements.

Finding	**Meets Expectations**
Description	Ecology completed the work agreed upon in the Environmental Performance Partnership Agreement for July 1, 2009 – June 30, 2011.
Explanation	The Agreement included statutory and priority inspections and timely enforcement expectations. Washington did not adopt an alternative compliance monitoring strategy, so the work in the Agreement was consistent with the SRF data metrics shown in Element 1. However, the PPA included a significant priority for analyzing and inspecting the small and conditionally exempt generator universe (called medium and small quantity generators in State regulations.) This emphasis on the smaller universe is reflected in the outcomes for Element 5 below.
Relevant metrics	File metric 4.a Planned non-inspection commitments completed (4/4) = 100%, Goal = 100%
State response	Per the OTIS SRF website, Ecology is inspecting SQGs (state term is MQGs) at five times the national rate (54% vs. 10%). About 270 of the 380 site inspections at RCRAInfo SQG sites were found to be federal SQGs. During Ecology inspections, 40 of these "SGQ" sites were found to actually be LQGs, and another 70+ were actually conditionally exempt or non-generators. Ecology believes that those LQG inspections should be credited to our LQG count. Ecology remains convinced that these are valuable inspections necessary to protect human health and the environment, and to provide equitable compliance for the business community.
Recommendation	None required.

Element 5 — Inspection Coverage: Completion of planned inspections.

Finding	**Area for State Improvement**
Description	During the timeframe of this review, Ecology did not conduct all the necessary inspections. The RCRA statute requires that "no less often than every two years" a thorough inspection of all Treatment, Storage, and Disposal Facilities (TSDFs) must be conducted. However, a thorough inspection of all TSDFs that are either owned or operated by the Federal Government must be completed each year. A thorough inspection has been interpreted to mean the entire facility and all activities related to the management of hazardous/dangerous waste.
Explanation	During the two years ending September 30, 2011, Ecology did not inspect 4 of the 13 TSDFs in the State. (See Appendix A-1 for the list of TSDFs not inspected.) None of these four TSDFs were federal facilities. Of these four, EPA conducted one inspection; monthly third party audits (overseen by Ecology) were conducted at two of the facilities; and one of the four facilities had no inspection or other oversight. Because TSDF inspection coverage percentages are only calculated based on the number of TSDFs for which a state conducted a Compliance Evaluation Inspection (CEI) during the review period, EPA inspections and third party audits are not included in the coverage calculation. Therefore, the four missed inspections resulted in a 69.2% TSDF coverage rate in Washington. The national goal is 100%. Most concerning is the lack of inspection coverage by the State's Nuclear Waste Program (NWP) of TSDFs that manage mixed (radioactive and dangerous) waste. The NWP is responsible for inspecting four facilities in the State: Areva, Puget Sound Naval Shipyard, Perma-Fix, and Hanford. Areva and PermaFix, two of the four TSDFs discussed in the previous paragraph, were not inspected the two years ending in September 2011as required by statute (though Perma-Fix was inspected by EPA as part of a work sharing agreement). In addition to the data showing that the NWP did not inspect Areva and PermaFix in the two year cycle, our file review of the Hanford inspections indicated that, even though Compliance Evaluation Inspections (CEIs) were coded in the data base indicating thorough inspections of the facility, dangerous waste management units in only two of the 37 Unit Groups[9] at the Hanford Facility had been inspected

[9] A Unit Group is a Hanford-specific term that describes an administrative grouping of related dangerous waste management units. Each unit group is associated with a section of the permit application, and a chapter of the Hanford Dangerous Waste permit. There are 37 Unit Groups/Chapters in the Hanford Permit.

in FY2011. This level of inspection coverage does not meet the statutory requirement for a thorough (entire facility) annual inspection of a Federal Facility TSDF. The lack of inspections may be partially attributed to the lack of inspectors (only two) in the NWP office.

Though not directly evaluated by the SRF, an issue related to inspections at the Hanford facility was realized during discussions with the NWP inspectors. Based on these conversations it appears that it was the practice of Ecology's NWP to routinely provide written advanced notice to the Department of Energy that delineated the scope of the upcoming inspections; the subsequent inspections appear to have been limited to the scope of the written pre-notice. According to Ecology staff, this practice created at least one instance when the Ecology inspectors had to return to their office to write an inspection notice to Energy before inspecting an area at Hanford where the inspector had earlier observed a potential violation. This notification practice appears to significantly inhibit Ecology's ability to complete thorough inspections at Hanford and is inconsistent with how Ecology generally operates its inspection program throughout the remainder of the State.

In addition to the finding for TSDFs, there was also a shortfall in the OTIS data for LQG inspection coverage: 17.9% annually and 62.4% over the five years ending September 30, 2011. Based on the standard of the SRF, it appears that Ecology was below the inspection goal of 20% of the LQG universe annually and 100% coverage over 5 years. However, the shortfall was due to SRF methodology that selected only LQGs included in the 2009 Biennial Report. Further analysis showed that Ecology completed 110 inspections including new LQGs in addition to those listed on the Biennial Report list, achieving approximately 26% inspection coverage which is greater than the 20% inspection goal.

Moreover, Ecology successfully executed its Performance Partnership Agreement strategy for inspecting medium and small generators, covering 42.5% of the Washington universe over 5 years, greatly surpassing the national average of 11% coverage for the medium and small generators universe.

Relevant metrics

Data Metrics:
5.a Two-year inspection coverage for operating TSDFs (9/13) = 69.2%, Goal = 100%, National Average = 89.4%
(Note: If the EPA inspection under the work share agreement is included, the value for metric 5.a is 10/13 = 76.9%.)

5.b Annual inspection coverage for LQGs (76/425) = 17.9%, Goal = 20%,

National Average = 22.6%
(Note: This data metric calculation is based on data in OTIS; Ecology actually achieved approximately 26% annual inspection coverage for LQGs – see text above under Explanation.)

5.c Five-year inspection coverage for LQGs (265/425) = 62.4%, Goal = 100%, National Average = 62.9%
(Note: See text above regarding higher LQG coverage than what is reflected in the OTIS data of this calculation.)

5.d Five-year inspection coverage for active SQGs (265/624) = 42.5%, National Average = 11%

5.e Five-year inspection coverage at other sites,

- 5e1 Active conditionally exempt small quantity generators = 225
- 5e2 Active transporters = 39
- 5e3 Active non-notifiers = 0
- 5e4 Active sites not covered by metrics 5a through 5e3 = 366

State response

NWP collaborated with EPA Region 10 to ensure the non-Hanford TSD inspection commitments were inspected by either EPA or Ecology on the required schedule. In one case, Region X told NWP that EPA wanted to inspect the TSDF, so Ecology did not lead an inspection at that facility. In one case, Ecology did inspect the TSDF, but referred the inspection to EPA.

With respect to Hanford, it is difficult to inspect all 37 dangerous waste management units and complete generator inspections within one year. The number of Hanford inspections were up slightly in 2012, and NWP expects them to be up again in 2013.

Regarding the NWP policy regarding pre-notification:
The NWP Attachment to the Ecology Compliance Assurance Manual states:

> 5. For typical TSD inspections, the Lead Inspector will notify the contractor environmental representative of the facility to be inspected 24 to 48 hours in advance of the inspection. The notification should include identity of the Ecology personnel attending the inspection, describe in general terms what the inspection is about, and request that any documentation that will be needed be available for review.
>
> 6. Many inspections are performed to observe ongoing operating conditions at a facility, to assess emergent situations, or to follow up a complaint registered with Ecology. Typically in such cases, the Lead Inspector will not notify USDOE or the facility in

advance, except to call the contractor's environmental representative of the facility to be inspected shortly before arriving at the facility."

Ecology sometimes provides advance notice for our convenience as indicated in #5 above, so that we don't have to wait for radiation control technicians to arrive at the inspection. At other times, Ecology does not provide advance notice, as indicated in #6 above.

The NWP Attachment to the Ecology Compliance Assurance Manuel does not restrict agency staff from pursuing investigating a violation noted during an inspection, even if it is not within the scope of an inspection that has been described in a pre-notification. The inspection noted by EPA was a onetime interpretation by a Dept. of Energy employee, which has been corrected. NWP does not have an agreement with USDOE that Ecology will provide prior written notice of an inspection

NWP has prepared a Supplemental Budget request to add two additional full time inspectors.

HWTR response regarding 2 commercial TSD inspections:
HWTR did not inspect the Burlington Environmental Kent and Tacoma TSD facilities during federal fiscal years 2010 and 2011. At that time, those facilities were operating under an agreed order to conduct third compliance party audits at least every two months, with stipulated penalties for non-compliance. These compliance audits resulted in additional penalties of $30,000 and $40,000 when violations were reported. We believe those inspections and Ecology's review of the results more than fulfilled the required inspection workload.

Response from HWTR regarding LQG inspections:

OTIS Metrics analysis through May 29, 2013:

All in %	FY 2011 (frozen data, SRF values)		FY 2012 (frozen data)		YTD 2013 (production data)	
	Nat'l	WA	Nat'l	WA	Nat'l	WA
5.a – 2 yr TSD	89.4	69.2	88.9	69.2	78.1	69.2
5.b – annual LQG	22.6	17.9	21.7	23.8	10.0	15.5
5.c – 5 yr LQG	62.9	62.4	64.2	65.2	63.2	66.3
5.d – 5 yr SQG	11.0	42.5	10.9	52.0	10.3	54.4

Washington's current (YTD 2013) LQG inspection rates are higher than

the current annual and 5-year national averages.

OTIS Metric 5b credits Ecology with 76 LQG CEIs for FY 2011 as of the data freeze date. Ecology inspectors found 73 of these sites to be LQGs at the time of the inspection. Ecology determined 41 other sites to be LQGs at the time of the inspection and during all follow-up work, and should receive LQG credit for those inspections, even though the sites are not recognized as LQGs in RCRAInfo. In fact they were LQGs at the time of the inspection and all follow-up work.

Furthermore, the May 2012 RCRAInfo CME Coverage Inspection Report, fourth quarter cumulative for FFY 2011 credits Ecology with 90 LQG and 12 TSD inspections.

Since the data was frozen for Federal Fiscal Year 2011, Ecology has increased our SQG inspection coverage and sees over half of the active SQG universe each year. This is roughly five times the national rate of about 11%. Again many of those inspections find regulated generators that are not accurately reflected in RCRA Info.

The generator universes are changing constantly, with potentially major impact when examining the 5-year coverage (metric 5.c). Basing this metric on the Biennial Report may be the best current option, but should be recognized as inaccurate. To help address this, Ecology has proposed a change in RCRAInfo as part of the Phoenix project. This change, USITS Ticket 51163, would allow generator status tracking at the inspection level. WA will continue tracking the generator status found during CEIs in RCRAInfo's evaluation notes field.

Ecology believes that more work on gaining accuracy on the scope of inspection numbers is essential during the SRF review, and recommends that discussion of such problems, gaining accurate data from RCRA Info to include those that might not be otherwise counted, be part of the SRF discussions prior to providing the states a public document with inaccurate reflection of the State's work.

Recommendation

As part of the 2014-15 EPA-Ecology Performance Partnership Agreement (PPA) and annual inspection planning process, Ecology will ensure all dangerous waste management units, generator and satellite accumulation areas, and transportation practices at Hanford will be thoroughly inspected by the end of September 2015. To ensure the entire facility is inspected, EPA recommends using the Facility Unit Groups as an inspection outline. This commitment should be in addition to meeting the required inspection levels for other TSDFs and LQGs in Washington. To ensure that inspectors are not prevented from conducting thorough inspections of any

facility in the State, Ecology's NWP, HWTR Program, and the Industrial Section of the Waste-2-Resources Program will coordinate so that the HWTR Inspector Guidance manual becomes the accepted standard guidance for conducting RCRA/Dangerous Waste Inspections in Washington.

Additionally, Ecology and EPA will continue the regularly scheduled quarterly meeting discussions of the status of inspection coverage and inspection findings throughout the State. Region 10 and Ecology will review inspection coverage annually in monitoring the Performance Partnership Agreement implementation to confirm that inspection commitments have been met.

Element 6 — Quality of Inspection Reports: Proper and accurate documentation of observations and timely report completion.

Finding	**Area for State Improvement**
Description	There were numerous missing inspection reports, as well as many that did not meet the goal of the EPA and State enforcement response policy for completing inspection reports within 150 days.
Explanation	Our sample of 44 reports from 35 facilities found problems documenting completion of the reported compliance inspections. There were 7 facility files (2 at Hanford) that did not include compliance inspection reports to support the compliance evaluation inspection data entered in RCRAInfo. If the ratio from our sample is representative of the overall program, then Ecology's inspection outputs reported in OTIS are 16% higher than the actual work completed. The files with missing reports included letters to the facility operators that indicated no violations were found but did not document inspections appropriately. Some of the file information indicated that there were not compliance issues at the facility but, without a comprehensive report, there was not sufficient documentation for the reviewers to verify compliance status. EPA and Ecology guidance both require full inspection reports to support all compliance inspections that are entered into RCRAInfo. In addition to the missing reports, there were 7 inspection reports (3 at Hanford) that were not complete and sufficient to determine compliance. Some lacked narrative explanations and citations of details identifying violations, relying too much on photographs or leaving out important details about the purpose, participants and locations involved. As noted above, there were 7 facility files with no reports, which by definition did not meet the timely completion goal. In the other 37 files, 30 inspection reports were completed within the 150 days allowed by the EPA and State's enforcement response policy timeline. The main focus of the timely completion shortfall was in the Industrial Program which is responsible for relatively larger and more complex facilities that may require more time to complete reports. This finding is recurring from Round 1, even though Ecology responded to the recommendation and completed corrections in August 2008. Our present recommendation is more intensive in an effort to correct this recurring problem.
Relevant metrics	Metric 6.a Inspection reports complete and sufficient documentation to

determine compliance (29/44) = 65.9%, Goal = NA

Metric 6.b Timeliness of inspection report completion (30/44) = 68.2%, Goal = 100%

State response

To date, Ecology has found a simple letter sufficient to document inspections at conditionally exempt SQGs where no violations were found. Although not a formal inspection report, these letters include enough information to be clear that the site was inspected and no compliance problems were found. However, to answer EPA's concern we have revised the template used for these inspections to include a short narrative inspection report.

Ecology recognizes that EPA evaluated Metric 6.b using the EPA standard of 150 days. We were initially concerned that a 30-day report goal in the HWTR Inspector Guidance Manual was considered to be agency policy for this evaluation. However, we now understand the SRF guidance requires evaluation against a state policy. However, our Guidance Manuel is not policy. We will reflect in the new PPA that our policy will be to meet the 150 day target as set by EPA standards and that our stretch goal will continue to be the 30 day target.

The 30-day goal is aggressive goal, meant for average inspections. It does not account for complex inspections with complicated follow-up activity. As the HWTR Inspector Guidance Manual states:

> "To provide guidance on expectations for timely completion and review of inspection reports, the following timeframes are offered. The ability to meet these timeframes for any particular inspection is a function of program priorities, workload, and available resources".

Process step	Days for step completion	Running total
Report drafted	7	7
Peer review	5	12
Inspector makes revisions	3	15
Compliance lead/unit sup review	7	22
Inspector completes report, i.e., mailed	3	25

That said, the average number of days for the reviewed, HWTR led, inspections was 44 days, with a median of 30 days. The reports for three inspections skewed those calculations: two joint inspections with EPA and Ecology's Nuclear Waste Program at USN PSNS took 103 and 150 days to complete the reports, and one inspection at Emerald Services took 199 days. Removing those three outlier inspections, the average becomes 31

days and the median is 27 days.

The HWTR program continues to work on improving the speed with which reports are completed. A recent LEAN project to streamline the hazardous waste compliance inspection process is resulting in changes being implemented across the state. We appreciate EPA Region 10's participation and help with the LEAN event.

The Industrial Section has implemented a monthly facility check-in process to ensure that our RCRA inspection reports meet timeliness goals. This process also ensures that evaluation and violation return to compliance data is entered in timely manner.

NWP completed the two missing inspection reports after the SRF file review and updated RCRAInfo accordingly. Additionally, individual inspectors within NWP have written performance goals to complete inspection reports in a timely manner.

EPA recommends that by June 30, we should discuss these penalty issues at a Compliance Network meeting. However, key personnel will not be at that meeting. We will schedule conversations to reflect our responses for the July Compliance Network meeting, and respond with a formal plan by September 30.

Recommendation

By September 30, 2013, EPA and Ecology will discuss at a Compliance Network meeting the importance of completing inspection documentation and compliance evaluations on time. Ecology will ensure that all inspectors have adequate training to completely document their inspections and ensure data are accurately entered into RCRAInfo within the required timeframes. Then, by December 31, 2013, Ecology will provide EPA with a plan to ensure that data entered for inspections are supported by the file documentation.

Inspection report timeliness will be added to the 2014-2015 PPA, effective July 1, 2013, as Ecology policy. The HWTR Inspector Guidance Manual will clarify that completing inspection reports within 30 days is a programmatic goal, and that completing reports within 150 days is agency policy and a requirement to meet the EPA RCRA Civil Enforcement Response Policy standard.

Ecology's HWTR Program, Nuclear Waste Program, and the Industrial Section of the Waste-2-Resources Program will coordinate so that the HWTR Inspector Guidance Manual becomes the accepted standard guidance for conducting RCRA and Dangerous Waste inspections at Ecology.

Element 7 — Identification of Alleged Violations: Compliance determinations accurately made and promptly reported in national database based on inspection reports and other compliance monitoring information.

Finding	**Meets Expectations**
Description	Ecology's program demonstrated a high accuracy for compliance determinations in the 37 files reviewed that had completed inspection reports. Washington State was also twice the national average for violations found.
Explanation	Accurate compliance determinations were found for 34 of the 37 inspection reports. We recognize that Ecology's high rate of violations found during inspections in FY 2011 was valid. Most of the violations were appropriately designated as secondary violations and were resolved through informal enforcement actions.
Relevant metrics	File Metric 7.a Accurate compliance determinations (34/37) = 91.9%, Goal = 100% Data Metric 7.b Violations found during inspections (264/344) = 76.7%, National Average = 32.5% Data Metric 8.a Significant Non-Complier identification rate (4/371) = 1.1%, National Average = 2.1% SRF Round 3 Revised 8.a SNC Rate from CEI only (2/344) = 0.6%, National Average = 1.6%
State response	Washington finds many violations during inspections. These violations are generally returned to compliance rapidly. For violations determined by HWTR led inspections in the review year, the average time to RTC was 93 days from the date of inspection, with a median time of 68 days. Element 6 notes the median time to complete the report and issue informal enforcement action is 30 days. Thus, many, if not most, generators resolve their violations within a month of their actual receipt of informal enforcement.
Recommendation	None required.

Element 8 — Identification of SNC and HPV: Accurate identification of significant noncompliance and high-priority violations, and timely entry into the national database.

Finding	**Area for State Attention**
Description	Ecology lagged the national average for identification of significant non-compliance in FY 2011, consistent with historical results.
Explanation	Washington's RCRA compliance monitoring strategy resulted in finding violations at 76.7% of the facilities inspected (see metric 7.b, above.) However, only 4 of 344 facilities inspected (1.2%) were designated as Significant Non-Compliers in FY 2011. While the national average SNC rate has steadily dropped from 3.8% in 2008 to 2.1% in 2011, the rate for Washington State has fluctuated from 1.1% up to 3.1% and back down to 1.1%. The EPA State Review Framework Plain Language Guide indicates that there is a need for further investigation and/or supplemental file review when the value for data metric 7.b. is very high but the data metric 8.a. value (SNC identification rate) is very low. This is the case with Ecology's RCRA program. The SRF Round 3 guidance change in SNC rate calculation to limit the numerator of new SNCs to only those with a CEI in the fiscal year reduced the rates even further, to 0.6% in Washington and the national average down to 1.6%. The two SNCs not counted by the new calculation had non-financial record reviews (NRR) associated with enforcement case development entered in 2011. The NRRs masked the data link to the CEIs that occurred in 2010 that originally discovered the SNC violations. However, the need for State attention to this issue is the same under either calculation. We reviewed all of the formal enforcement actions in FY 2011 in order to investigate the accuracy of the SNC designations. All formal enforcement cases involved SNC violators that were accurately determined by Ecology. In addition, all of the files we reviewed that were designated as Secondary Violators were also accurate. We did not find a problem with Ecology's inspections and identification of violations that would explain the below average SNC identification rates that Ecology has produced over the years. It may be that Washington's RCRA facilities have a relatively high percentage of secondary violations and have been responsive to Ecology's focus on preventing minor problems from becoming significant environmental problems. This would help explain the disparity between the high violation rates and low SNC rates.

On the other hand, it may be that Ecology's strategy to visit a higher than average percent of medium and small quantity generators (using State definition) has not provided the opportunity to find the greater number of significant non-compliers that would be more consistent with the national average.

The issue for State attention is why the high number of inspections with violations (275 in FY 2011, metric 1.c.1) yielded such a low number of cases of significant non-compliance (4 in FY 2011, metric 1.e.1.) The State should assess possible reasons for the divergence of these metrics and consider whether the State's inspection planning strategy should be adjusted to focus on the potential for finding more new cases of significant non-compliance.

Finally, we did see in data metric 2.a that there were 35 long-standing secondary violators, dating back to Fiscal Year 2006. The list of long-standing violators merits State attention to resolve any data problems and make appropriate SNC designations, if necessary.

Relevant metrics

Data metric 8.a SNC identification rate (4/371) = 1.1%,
National Average = 2.1%
SRF Round 3 Revised 8.a SNC Rate from CEI only (2/344) = 0.6%,
National Average = 1.6%

Data metric 8.b Timeliness of SNC determination (4/4) = 100%,
Goal = 100%, National Average = 81.7%

File metric 8.c Appropriate SNC determinations (28/28) = 100%,
Goal = 100%

State response

Washington discovered violations at more than twice the national average during the review period (33% vs. 77%) The average time to RTC was 93 days, with a median of 68 days.

EPA's Civil Enforcement Response Policy allows 240 days for secondary violators to return to compliance, receive formal enforcement, or be designated as a SNC. Use of this criteria would have resulted in Ecology designating 27 sites as SNCs.

However, considering that, 80% of sites have returned to compliance within 90 days of enforcement, we don't consider this a problem.

WA gains environmental compliance quickly with our current methods. Naming additional sites as SNC and entering the formal enforcement

process will reduce program efficiency.

Washington had 15 sites in SNC at some point during the review year, including major, contentious, cases with Burlington Environmental Inc in Kent and Tacoma, Double H Farms, John I Haas, Goodrich Corporation, Historic Reclamation, and US Dept of Energy Hanford facility, many of which involved multiple years effort.

The revised SRF Round 3 metric considers only new SNCs named during the review year. This minimizes the effort expended on SNCs named in off-review years and fails to recognize the time and resources needed to successfully conclude formal enforcement.

EPA reviewers raise the possibility that Ecology is inspecting too many CESQGs. However, Ecology does not agree with this assessment, as we have found many of the 'CESQGs' are regulated generators. The OTIS SRF report for YTD 13, Metric 5.d shows that Ecology is above the national average for LQGs and is inspecting five times the national average for SQGs.

Ecology is addressing the problem of longstanding violations per Metric 2.a. Two of those sites have since been designated as SNCs and received formal enforcement action outside the current SRF timeframe.

Recommendation None required.

Element 9 — Enforcement Actions Promote Return to Compliance: Enforcement actions include required corrective action that will return facilities to compliance in specified timeframe.

Finding	**Meets Expectations**
Description	All five of Ecology's formal enforcement actions in 2011 effectively returned SNC facilities to compliance. All twenty of the files for secondary violators we reviewed were returned to compliance. One facility, the US Dept of Energy Hanford Facility, does not fit into either category and requires an independent explanation.
Explanation	There were 5 formal enforcement actions issued in 2011 to SNC facilities that returned them all to compliance within reasonable timeframes. Ecology also issued one formal enforcement order to enforce permit conditions for post-closure and corrective action violations that returned a Secondary Violator to compliance. The other 19 SVs were also returned to compliance or, in one case, referred to EPA Region 10 for enforcement as part of the financial assurance priority area. The Hanford Facility presents unique challenges for compliance and enforcement that don't fit neatly into the SRF metrics. It is a long-term SNC with multiple compliance problems that cannot be addressed comprehensively in any one year. In 2011 the data showed 5 evaluations, 1 violation and 1 informal action that returned to compliance. However, formal enforcement actions necessary to address significant non-compliance have been complex undertakings among the State of Washington, US EPA and US DOJ, which continued during 2011 without conclusion. We do not expect the Hanford Facility, as a long-term SNC facility, to be returned to compliance in the foreseeable future.
Relevant metrics	File metric 9.a Enforcement that returns SNC sites to compliance (5/5) = 100%, Goal = 100% File metric 9.b Enforcement that returns SV sites to compliance (22/22) = 100%, Goal = 100% Data Metric 1.f.1 Number of sites with formal enforcement action = 6 Data Metric 1.d.1 Number of sites with informal enforcement = 269
State response	
Recommendation	None required.

Element 10 — Timely and Appropriate Action: Timely and appropriate enforcement action in accordance with policy relating to specific media.

Finding	**Meets Expectations**
Description	Ecology completed 100% of the SNC enforcement actions timely and 100% of the enforcement actions appropriately.
Explanation	The data selected showed all four of the review year and prior year SNCs were addressed by formal enforcement actions within 360 days of inspections.
Relevant metrics	Data metric 10.a Timely enforcement taken to address SNC (4/4) = 100%, Goal = 80%, National Average = 81.8% File metric 10.b Appropriate enforcement taken to address violations (27/27) = 100%, Goal = 100%
State response	
Recommendation	None required.

Element 11 — Penalty Calculation Method: Documentation of gravity and economic benefit in initial penalty calculations using BEN model or other method to produce results consistent with national policy and guidance.

Finding	**Area for State Attention**
Description	Ecology had one deficiency in the set of five penalty actions in 2011. This resulted from a unique set of circumstances with a chronic violator that went out of business and defaulted on the State penalty.
Explanation	The national goal was not met due to one problematic case. Four of the penalty files demonstrated Ecology's appropriate use of their penalty policy, including calculation of gravity and economic benefit consistent with national policy and guidance. One penalty action was an outlier in 2011. The State's SNC designation in RCRAInfo noted: "Laitala Painting has received five inspections …over the course of the last eleven years, during which a total of thirty-eight violations were cited." "Inadequate performance of regulatory responsibilities at Laitala Painting directly led to violations for illegal disposal, failure to designate and numerous repeat violations for improper waste management…" This case did not include calculation of penalties based on the gravity of the hazardous waste management violations or economic benefit accrued by the violator over the years of documented violations. Ecology issued a penalty solely based on the violator's failure to comply with the Ecology compliance order to return all of the prior year violations to compliance. After the penalty was issued the company went out of business and was evicted from the property, leaving the landowner responsible for waste management and disposal, if necessary. Ecology ended up sending the penalty to a collection agency with no record of it ever being paid.
Relevant metrics	File metric 11.a Penalty calculations reviewed that consider and include gravity and economic benefit (4/5) = 80%, Goal = 100% Data metric 1.g Total dollar amount of final penalties = $80, 240 Data metric 1.h Number of final formal actions with penalty in fiscal year Ecology = 5
State response	Ecology decisions for formal enforcement are considered on a case by case basis. The benefits for the environment and public must justify the time and effort invested. In the problematic case of Laitala paint, Ecology chose not to pursue a

penalty for the original violations due to the following factors:

- It was a small, family-owned painting contractor business in a slow economy with less than 4% of its previous workforce remaining at the time of the penalty.
- The Recommendation for Enforcement for the order states: "An order is recommended to motivate this company to properly manage and dispose of existing hazardous wastes on site before the company goes out of business, which appears to be a distinct possibility. A penalty is not initially recommended because the company is already experiencing a financial crisis and Ecology's first priority is proper management and disposal of the waste to prevent a cleanup site. Diverting any funds away from this purpose would be counterproductive at this point." Ecology determined that having the company spend their limited funds on proper disposal of the large accumulation of waste was more important than a penalty.
- After the penalty for failure to comply with all parts of the order was issued, the company went out of business and was evicted from the property. The property owner was not left with any waste to manage or dispose of, thanks to Ecology's actions.
- Ecology believes the best use of its own resources was to focus on directing the company's remaining dollars to clean up rather than abandoning the waste in question. Ecology recognized that spending state resources to pursue a large penalty against a company that would soon be gone would not be wise use of our very limited resources, in the best interest of the taxpayers, and may have distracted the facility from dealing with the wastes.
- The penalty for failure to comply with the order went to collections after the company went out of business. Ecology's Fiscal Office has received no payment and interest continues to accrue though the penalty will likely be written off in the next yearly review, since there is no resource to provide payment.

Recommendation None required.

Element 12 — Final Penalty Assessment and Collection: Differences between initial and final penalty and collection of final penalty documented in file.

Finding	**Area for State Improvement**
Description	There were minor discrepancies in three of the penalty cases that were collected in 2011. The problems were magnified in the file metric percentages due to the small sample size of five penalties issued in Washington. These minor problems on a few cases can be avoided in the future with more attention to documenting penalty collections.
Explanation	Four penalty actions showed a reduction from the initial to the final penalties and one of those was not documented. The initial calculation of the Aquatic Co. penalty indicated that the violations were in the mid-range of the major gravity scale (between $6,000 and $10,000) and the gravity penalty may have been as high as $72,000, along with $2,180 in economic benefit. The file record showed that the violator was offered an Expedited Settlement for $5,330 with no explanation of the reduction other than Ecology's interest in a rapid settlement and payment without the possibility of an appeal. Penalty collections were well documented in 3 of the 5 files we reviewed. Three files included good records of payment and one case of a closed business. The Professional Coatings case was also an Expedited Settlement Offer that had a good rationale but included documentation of only one installment payment made on the penalty. Payments should be promptly recorded in RCRAInfo. The Ballard Refinishers case was contested by the facility, and full payment was not documented in the file.
Relevant metrics	File metric 12.a Documentation on difference between initial and final penalty and rationale (3/4) = 75%, Goal = 100% File metric 12.b Documentation of penalty collection (3/5) = 60%, Goal = 100%
State response	EPA is mistaken in saying "the goal of the State's Expedited Settlement Offer is to quickly collect the money." Rather, the state's goal is to limit litigation by reaching a legally binding agreement quickly so that agency (inspector and attorney) resources can be used elsewhere. Professional Coatings agreed to an EEAO in April of 2011 and began payments in June. Two payments were inadvertently not added to RCRAInfo. Since June of 2011, Professional Coatings has made 24 regular monthly payments.

Ballard Refinishers was penalized in April 2011. They appealed and reached settlement in November 2011. Ballard Refinishers has made 17 regular monthly payments beginning January 2012.

Ecology has updated the EEAO cover letter template so that future letters will more closely resemble the Professional Coatings Inc. document, cited as a good example.

Ecology's Fiscal Office receives all penalty payments and maintains our official penalty payment records. They should be consulted in future reviews to verify payments recorded in RCRAInfo.

EPA recommends that by June 30, we should discuss these penalty issues at a Compliance Network meeting. However, key personnel will not be at that meeting. We will schedule conversations to reflect our responses for the July meeting, and respond with a formal plan by September 30.

Recommendation

By September 30, 2013, EPA and Ecology will discuss these penalty issues at a Compliance Network meeting. Ecology will develop and present to EPA a plan by December 31, 2013, for clear documentation of penalty justifications, settlements, collections, and timely data entry.

Appendix A: Data Metric Analysis

Attached below are the results of the SRF data metric analyses (DMAs). All data metrics are analyzed prior to the on-site file review. This provides reviewers with essential advance knowledge of potential problems. It also guides the file selection process as these potential problems highlight areas for supplemental file review.

The initial findings are preliminary observations. They are used as a basis for further investigation during the file review and through dialogue with the State. Where applicable, this analysis evaluates State performance against the national goal and average. Final findings are developed only after evaluating the data alongside file review results and details from conversations with the State. Through this process, initial findings may be confirmed or modified. Final findings are presented in Section III of this report.

Clean Water Act

Because Ecology's CWA database, PARIS, has not been linked with EPA's national database since 2010, the DMA downloaded from OTIS was insufficient to conduct this SRF review of Ecology's NPDES program. EPA-Region 10 worked with Ecology data managers to construct a similar DMA from Ecology's data in PARIS. For this reason we have included in this Appendix the DMA downloaded from OTIS (incomplete due to lack of data entry) followed by the DMA constructed from State data and used in conducting this SRF review.

Washington Department of Ecology, Data from OTIS

Metric ID	Metric Name	Metric Type	Agency	Nat'l Goal	Nat'l Avg	Washington	Count	Universe	Not Counted
1a1	Number of Active NPDES Majors with Individual Permits	Data Verification	State			69			
1a2	Number of Active NPDES Majors with General Permits	Data Verification	State			0			
1a3	Number of Active NPDES Non-Majors with Individual Permits	Data Verification	State			360			
1a4	Number of Active NPDES Non-Majors with General Permits	Data Verification	State			2869			
1b1	Permit Limits Rate for Major Facilities	Goal	State	>= 95%	98.6%	100%	69	69	0
1b2	DMR Entry Rate for Major Facilities.	Goal	State	>= 95%	96.5%	.1%	1	1330	1329
1b3	Number of Major Facilities with a Manual Override of RNC/SNC to a Compliant Status	Data Verification	State			0			
1c1	Permit Limits Rate for Non-Major Facilities	Information Only	State		66.1%	51.9%	187	360	173
1c2	DMR Entry Rate for Non-Major Facilities.	Information Only	State		72.6%	0%	0	4450	4450
1e1	Facilities with Informal Actions	Data Verification	State			0			

1e2	Total Number of Informal Actions at CWA NPDES Facilities	Data Verification	State		0				
1f1	Facilities with Formal Actions	Data Verification	State		0				
1f2	Total Number of Formal Actions at CWA NPDES Facilities	Data Verification	State		0				
1g1	Number of Enforcement Actions with Penalties	Data Verification	State		0				
1g2	Total Penalties Assessed	Data Verification	State			$0			
2a1	Number of formal enforcement actions, taken against major facilities, with enforcement violation type codes entered.	Data Verification	State		0				
5a1	Inspection Coverage - NPDES Majors	Goal metric	State	56.8%	0%		0	69	69
5b1	Inspection Coverage - NPDES Non-Majors	Goal metric	State	24.2%	0%		0	360	360
5b2	Inspection Coverage - NPDES Non-Majors with General Permits	Goal metric	State	4.5%	0%		0	2869	2869
7a1	Number of Major Facilities with Single Event Violations	Data Verification	State		0				
7a2	Number of Non-Major Facilities with Single Event Violations	Informational only	State		0				
7b1	Compliance schedule violations	Data Verification	State		0				
7c1	Permit schedule violations	Data Verification	State		0				
7d1	Major Facilities in Noncompliance	Review Indicator	State	71.2%	44.9%		31	69	38
7f1	Non-Major Facilities in Category 1 Noncompliance	Data Verification	State		19				
7g1	Non-Major Facilities in Category 2 Noncompliance	Data Verification	State		85				
7h1	Non-Major Facilities in Noncompliance	Information Only	State	47.5%	21.4%		77	360	283
8a1	Major Facilities in SNC	Review Indicator	State		0				
8a2	Percent of Major Facilities in SNC	Review Indicator	State	22.3%	0%		0	72	72
10a1	Major facilities with Timely Action as Appropriate	Goal metric	State	15.4%	0/0		0	0	0

Washington Dept of Ecology, Data from the State Database, PARIS

Metric ID	Metric Name	Metric Type	Agency	Nat'l Goal	Natl Avg	Washington	Count	Universe	Not Counted	Initial Findings	Explanation
1a1	Number of Active NPDES Majors with Individual Permits	Data Verification	State			74					
1a2	Number of Active NPDES Majors with General Permits	Data Verification	State			0					
1a3	Number of Active NPDES Non-Majors with Individual Permits	Data Verification	State			353					
1a4	Number of Active NPDES Non-Majors with General Permits	Data Verification	State			4451					
1b1	Permit Limits Rate for Major Facilities	Goal	State	>= 95%	98.6%	100%	74	74	0	Meets Expectation	

1b2	DMR Entry Rate for Major Facilities.	Goal	State	>= 95%	96.5%	98%	888	905	17	Meets Expectation	
1b3	Number of Major Facilities with a Manual Override of RNC/SNC to a Compliant Status	Data Verification	State			0					
1c1	Permit Limits Rate for Non-Major Facilities	Informational only	State		66.1%	100.00%	353	353	0	Meets Expectation	
1c2	DMR Entry Rate for Non-Major Facilities	Informational only	State		72.6%		0	4450	4450	Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
1e1	Facilities with Informal Actions	Data Verification	State				1461				
1e2	Total Number of Informal Actions at CWA NPDES Facilities	Data Verification	State				2318				
1f1	Facilities with Formal Actions	Data Verification	State				33				
1f2	Total Number of Formal Actions at CWA NPDES Facilities	Data Verification	State				38				
1g1	Number of Enforcement Actions with Penalties	Data Verification	State				55				
1g2	Total Penalties Assessed	Data Verification	State				$240,506				
2a1	Number of formal enforcement actions, taken against major facilities, with enforcement violation type codes entered.	Data Verification	State			0					
5a1	Inspection Coverage - NPDES Majors	Goal metric	State		54.4%	58%	43	74	31	Meets Expectation	
5b1	Inspection Coverage - NPDES Non-Majors	Goal metric	State		23.7%	36%	127	353	226	Meets Expectation	
5b2	Inspection Coverage - NPDES Non-Majors with General Permits	Goal metric	State		19.2%	30%	1355	4451	3096	Meets Expectation	
7a1	Number of Major Facilities with Single Event Violations	Data Verification	State			State not reporting				Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
7a2	Number of Non-Major Facilities with Single Event Violations	Informational only	State			State not reporting				Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
7b1	Compliance schedule violations	Data Verification	State			8					
7c1	Permit schedule violations	Data Verification	State			13					

7d1	Major Facilities in Noncompliance	Review Indicator	State	71.2%	36%	27	74	47	Meets Expectation	
7f1	Non-Major Facilities in Category 1 Noncompliance	Data Verification	State			State not reporting			Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
7g1	Non-Major Facilities in Category 2 Noncompliance	Data Verification	State			State not reporting			Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
7h1	Non-Major Facilities in Noncompliance	Informational only	State	47.5%	42%	148	353	205	Meets Expectation	
8a1	Major Facilities in SNC	Review indicator metric	State		0	State not reporting			Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
8a2	Percent of Major Facilities in SNC	Review indicator metric	State	22.3%	0%	State not reporting			Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012
10a1	Major facilities with Timely Action as Appropriate	Goal metric	State	15.4%	0/0	State not reporting		0	Area for State Improvement	Data system to be inputting to ICIS-NPDES by October 2012

Clean Air Act

ECOLOGY -- ALL OFFICES COMBINED

Frozen Data as of 5/7/2012

Metric ID	Metric Name	Metric Type	Agency	Nat'l Goal	Nat'l Avg	Washington	Count	Universe	Not Counted	Initial Finding	Explanation
1a1	Number of Active Major Facilities (Tier I)	Data Verification	State			26				Meets Requirement	
1a2	Number of Active Synthetic Minors (Tier I)	Data Verification	State			22				Meets Requirement	
1a3	Number of Active NESHAP Part 61 Minors (Tier I)	Data Verification	State			0				Meets Requirement	
1a4	Number of Active CMS Minors and Facilities with Unknown Classification (Not counted in metric 1a3) that are Federally-Reportable (Tier I)	Data Verification	State			0				Meets Requirement	

1a5	Number of Active HPV Minors and Facilities with Unknown Classification (Not counted in metrics 1a3 or 1a4) that are Federally-Reportable (Tier I)	Data Verification	State			0				Meets Requirement	
1a6	Number of Active Minors and Facilites with Unknown Classification Subject to a Formal Enforcement Action (Not counted in metrics 1a3, 1a4 or 1a5) that are Federally-Reportable (Tier II)	Data Verification	State			0				Meets Requirement	
1b1	Number of Active Federally-Reportable NSPS (40 C.F.R. Part 60) Facilities	Data Verification	State			24				Meets Requirement	
1b2	Number of Active Federally-Reportable NESHAP (40 C.F.R. Part 61) Facilities	Data Verification	State			3				Meets Requirement	
1b3	Number of Active Federally-Reportable MACT (40 C.F.R. Part 63) Facilities	Data Verification	State			13				Meets Requirement	
1b4	Number of Active Federally-Reportable Title V Facilities	Data Verification	State			26				Meets Requirement	
1c1	Number of Tier I Facilities with an FCE (Facility Count)	Data Verification	State			19				Meets Requirement	
1c2	Number of FCEs at Tier I Facilities (Activity Count)	Data Verification	State			21				Meets Requirement	
1c3	Number of Tier II Facilities with FCE (Facility Count)	Data Verification	State			0				Meets Requirement	
1c4	Number of FCEs at Tier II Facilities (Activity Count)	Data Verification	State			0				Meets Requirement	
1d1	Number of Tier I Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			3				Meets Requirement	
1d2	Number of Tier II Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			0				Meets Requirement	
1e1	Number of Informal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			9				Meets Requirement	

1e2	Number of Tier I Facilities Subject to an Informal Enforcement Action (Facility Count)	Data Verification	State			7				Meets Requirement	
1f1	Number of HPVs Identified (Activity Count)	Data Verification	State			0				Meets Requirement	
1f2	Number of Facilities with an HPV Identified (Facility Count)	Data Verification	State			0				State Attention	6 formal actions but no new HPVs - discuss w/state
1g1	Number of Formal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			6				State Attention	6 formal actions but no new HPVs - discuss w/state
1g2	Number of Tier I Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			5				Meets Requirement	
1g3	Number of Formal Enforcement Actions Issued to Tier II Facilities (Activity Count)	Data Verification	State			0				Meets Requirement	
1g4	Number of Tier II Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			0				Meets Requirement	
1h1	Total Amount of Assessed Penalties	Data Verification	State			28,000				Meets Requirement	
1h2	Number of Formal Enforcment Actions with an Assessed Penalty	Data Verification	State			6				Meets Requirement	
1i1	Number of Stack Tests with Passing Results	Data Verification	State			468				Meets Requirement	
1i2	Number of Stack Tests with Failing Results	Data Verification	State			3				Meets Requirement	
1i3	Number of Stack Tests with Pending Results	Data Verification	State			0				Meets Requirement	
1i4	Number of Stack Tests with No Results Reported	Data Verification	State			0				Meets Requirement	
1i5	Number of Stack Tests Observed & Reviewed	Data Verification	State			47				Meets Requirement	
1i6	Number of Stack Tests Reviewed Only	Data Verification	State			424				Meets Requirement	
1j	Number of Title V Annual Compliance Certifications Reviewed	Data Verification	State			27				Meets Requirement	

2a	Major Sources Missing CMS Source Category Code	Review Indicator	State			1				Meets Requirement	
3a1	Timely Entry of HPV Determinations	Review Indicator	State			0				Meets Requirement	
3a2	Untimely Entry of HPV Determinations	Goal	State			0				Meets Requirement	No new HPVs
3b1	Timely Reporting of Compliance Monitoring Minimum Data Requirements	Goal	State	100%	78.60%	68.75%	33	48	15	Area for State Improvement	Below the National Goal
3b2	Timely Reporting of Stack Test Minimum Data Requirements	Goal	State	100%	75.50%	33.13%	156	471	315	Area for State Improvement	Significantly below the National Goal
3b3	Timely Reporting of Enforcement Minimum Data Requirements	Goal	State	100%	76.10%	13.33%	2	15	13	Area for State Improvement	Significantly below the National Goal
5a	FCE Coverage Major	Goal	State	100%	90%	100%	10	10	0	Meets Requirement	
5b	FCE Coverage SM-80	Goal	State	100%	90.50%	77.78%	7	9	2	State Attention	2 FCEs missed
5c	FCE Coverage Synthetic Minors (non SM-80)	Goal	State	100%	66.70%	0/0	0	0	0	Meets Requirement	
5d	FCE Coverage Minors	Goal	State	100%	11.70%	0/0	0	0	0	Meets Requirement	
5e	Review of Title V Annual Compliance Certifications Completed	Goal	State	100%	72.50%	96.15%	25	26	1	Meets Requirement	Only missed one - discuss with state
7b1	Alleged Violations Reported Per Informal Enforcement Actions (Tier I only)	Goal	State	100%	62.20%	0%	0	7	7	State Attention	Historically, R10 has not advocated changing the compliance status when an informal enforcement action is taken unless it is followed by a formal action
7b2	Alleged Violations Reported Per Failed Stack Tests	Review Indicator	State		54%	0%	0	2	2	Review Indicator	Discuss with State
7b3	Alleged Violations Reported Per HPV Identified	Goal	State	100%	69.60%	0/0	0	0	0	Meets Requirement	No new HPVs
8a	HPV Discovery Rate Per Major Facility Universe	Review Indicator	State		3.90%	0%	0	26	26	Review Indicator	
8b	HPV Reporting Indicator at Majors with Failed Stack Tests	Review Indicator	State		20.50%	0/0	0	1	1	State Attention	Should the stack test failure have been a HPV?
10a	HPV cases which meet the timeliness goal of the HPV Policy	Review Indicator	State		63.70%	0/0	0	0	0	Meets Requirement	No new HPVs

Puget Sound Clean Air Agency -- DMA

8/2/2012

Metric ID	Metric Name	Metric Type	Agency	Nat'l Goal	Nat'l Avg	Washington	Count	Universe	Not Counted	Initial Findings	Explanation
1a1	Number of Active Major Facilities (Tier I)	Data Verification	State			34				Meets Requirement	
1a2	Number of Active Synthetic Minors (Tier I)	Data Verification	State			77				Meets Requirement	
1a3	Number of Active NESHAP Part 61 Minors (Tier I)	Data Verification	State			4				Meets Requirement	
1a4	Number of Active CMS Minors and Facilities with Unknown Classification (Not counted in metric 1a3) that are Federally-Reportable (Tier I)	Data Verification	State			0				Meets Requirement	
1a5	Number of Active HPV Minors and Facilities with Unknown Classification (Not counted in metrics 1a3 or 1a4) that are Federally-Reportable (Tier I)	Data Verification	State			0				Meets Requirement	
1a6	Number of Active Minors and Facilites with Unknown Classification Subject to a Formal Enforcement Action (Not counted in metrics 1a3, 1a4 or 1a5) that are Federally-Reportable (Tier II)	Data Verification	State			14				Meets Requirement	
1b1	Number of Active Federally-Reportable NSPS (40 C.F.R. Part 60) Facilities	Data Verification	State			54				Meets Requirement	
1b2	Number of Active Federally-Reportable NESHAP (40 C.F.R. Part 61) Facilities	Data Verification	State			8				Meets Requirement	
1b3	Number of Active Federally-Reportable MACT (40 C.F.R. Part 63) Facilities	Data Verification	State			35				Meets Requirement	
1b4	Number of Active Federally-Reportable Title V Facilities	Data Verification	State			30				Meets Requirement	
1c1	Number of Tier I Facilities with an FCE (Facility Count)	Data Verification	State			113				Meets Requirement	
1c2	Number of FCEs at Tier I Facilities (Activity Count)	Data Verification	State			113				Meets Requirement	
1c3	Number of Tier II Facilities with FCE (Facility Count)	Data Verification	State			0				Meets Requirement	Tier II is optional

1c4	Number of FCEs at Tier II Facilities (Activity Count)	Data Verification	State			0				Meets Requirement	Tier II is optional
1d1	Number of Tier I Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			7				Meets Requirement	
1d2	Number of Tier II Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			0				Meets Requirement	
1e1	Number of Informal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			94				Meets Requirement	
1e2	Number of Tier I Facilities Subject to an Informal Enforcement Action (Facility Count)	Data Verification	State			36				Meets Requirement	
1f1	Number of HPVs Identified (Activity Count)	Data Verification	State			2				Agency Attention	Appears low: only 2 HPVs identified when 113 Tier I FCEs were conducted
1f2	Number of Facilities with an HPV Identified (Facility Count)	Data Verification	State			1				Agency Attention	Appears low: only 1 new HPV facility detected per 113 Tier I FCEs.
1g1	Number of Formal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			27				Meets Requirement	
1g2	Number of Tier I Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			10				Meets Requirement	
1g3	Number of Formal Enforcement Actions Issued to Tier II Facilities (Activity Count)	Data Verification	State			7				Meets Requirement	Taking formal actions at Tier II facilities.
1g4	Number of Tier II Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			5				Meets Requirement	Reporting formal actions at Tier II facilities.
1h1	Total Amount of Assessed Penalties	Data Verification	State			$176,589				Meets Requirement	
1h2	Number of Formal Enforcment Actions with an Assessed Penalty	Data Verification	State			32				Meets Requirement	
1i1	Number of Stack Tests with Passing Results	Data Verification	State			106				Meets Requirement	
1i2	Number of Stack Tests with Failing Results	Data Verification	State			3				Meets Requirement	
1i3	Number of Stack Tests with Pending Results	Data Verification	State			0				Meets Requirement	
1i4	Number of Stack Tests with No Results Reported	Data Verification	State			0				Meets Requirement	
1i5	Number of Stack Tests Observed & Reviewed	Data Verification	State			31				Meets Requirement	

1i6	Number of Stack Tests Reviewed Only	Data Verification	State			78				Meets Requirement	
1j	Number of Title V Annual Compliance Certifications Reviewed	Data Verification	State			30				Meets Requirement	
2a	Major Sources Missing CMS Source Category Code	Review Indicator	State			0				Meets Requirement	
3a1	Timely Entry of HPV Determinations	Review Indicator	State			2				Meets Requirement	
3a2	Untimely Entry of HPV Determinations	Goal	State	0		0				Meets Requirement	
3b1	Timely Reporting of Compliance Monitoring Minimum Data Requirements	Goal	State	100%	78.6%	39.9%	57	143	86	Area for Agency Improvement	Below the Nat. Goal and Nat. Average for entry of Compliance Monitoring MDRs.
3b2	Timely Reporting of Stack Test Minimum Data Requirements	Goal	State	100%	75.5%	43.1%	47	109	62	Area for Agency Improvement	Below the Nat. Goal and Nat. Average for entry of Stack Test MDRs.
3b3	Timely Reporting of Enforcement Minimum Data Requirements	Goal	State	100%	76.1%	86.6%	116	134	18	Agency Attention	Above the Nat. Average but below the Nat. Goal for timely reporting of enforcement MDRs.
5a	FCE Coverage Major	Goal	State	100%	90%	100%	33	33	0	Meets Requirement	
5b	FCE Coverage SM-80	Goal	State	100%	90.6%	100%	73	73	0	Meets Requirement	
5c	FCE Coverage Synthetic Minors (non SM-80)	Goal	State	100%	66.7%	0/0	0	0	0	Meets Requirement	
5d	FCE Coverage Minors	Goal	State	100%	11.7%	0/0	0	0	0	Meets Requirement	
5e	Review of Title V Annual Compliance Certifications Completed	Goal	State	100%	72.5%	100%	30	30	0	Meets Requirement	
7b1	Alleged Violations Reported Per Informal Enforcement Actions (Tier I only)	Goal	State	100%	62.2%	16.7%	6	36	30	Agency Attention	Historically, R10 has not advocated chaning the compliance status when an informal enforcement action is taken unless it is followed by a formal action
7b2	Alleged Violations Reported Per Failed Stack Tests	Review Indicator	State		54%	50%	1	2	1	Meets Requirement	Review Indicator
7b3	Alleged Violations Reported Per HPV Identified	Goal	State	100%	69.6%	100%	1	1	0	Meets Requirement	

8a	HPV Discovery Rate Per Major Facility Universe	Review Indicator	State		3.9%	2.9%	1	34	33	Agency Attention	Review Indicator but seems low compared to the number of Major facilities inspected
8b	HPV Reporting Indicator at Majors with Failed Stack Tests	Review Indicator	State		20.5%	0%	0	1	1	Agency Attention	Data error: Discovery should have been Stack Test Failed not PCE conducted.
10a	HPV cases which meet the timeliness goal of the HPV Policy	Review Indicator	State		63.7%	40%	2	5	3	Area for Agency Improvement	Low percentage being addressed within 270 days however cases that weren't. are very complex.

SWCAA DATA METRIC ANALYSIS

Frozen Data as of 4/26/2012

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average	Washington	Count	Universe	Not Counted	Analysis - Initial Findings
1a1	Number of Active Major Facilities (Tier I)	Data Verification	State			13				Appears Acceptable
1a2	Number of Active Synthetic Minors (Tier I)	Data Verification	State			19				Appears Acceptable
1a3	Number of Active NESHAP Part 61 Minors (Tier I)	Data Verification	State			1				Appears Acceptable
1a4	Number of Active CMS Minors and Facilities with Unknown Classification (Not counted in metric 1a3) that are Federally-Reportable (Tier I)	Data Verification	State			1				Discuss with Agency: what is the compliance status of this facility?
1a5	Number of Active HPV Minors and Facilities with Unknown Classification (Not counted in metrics 1a3 or 1a4) that are Federally-Reportable (Tier I)	Data Verification	State			0				Appears Acceptable
1a6	Number of Active Minors and Facilites with Unknown Classification Subject to a Formal Enforcement Action (Not counted in metrics 1a3, 1a4 or 1a5) that are Federally-Reportable (Tier II)	Data Verification	State			1				Appears Acceptable
1b1	Number of Active Federally-Reportable NSPS (40 C.F.R. Part 60) Facilities	Data Verification	State			1				Appears Acceptable
1b2	Number of Active Federally-Reportable NESHAP (40 C.F.R. Part 61) Facilities	Data Verification	State			2				Appears Acceptable

1b3	Number of Active Federally-Reportable MACT (40 C.F.R. Part 63) Facilities	Data Verification	State			1				Appears Acceptable
1b4	Number of Active Federally-Reportable Title V Facilities	Data Verification	State			13				Appears Acceptable
1c1	Number of Tier I Facilities with an FCE (Facility Count)	Data Verification	State			26				Appears Acceptable
1c2	Number of FCEs at Tier I Facilities (Activity Count)	Data Verification	State			28				Appears Acceptable
1c3	Number of Tier II Facilities with FCE (Facility Count)	Data Verification	State			0				Tier II is optional
1c4	Number of FCEs at Tier II Facilities (Activity Count)	Data Verification	State			0				Tier II is optional
1d1	Number of Tier I Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			4				Appears Acceptable
1d2	Number of Tier II Facilities with Noncompliance Identified (Facility Count)	Data Verification	State			0				Appears Acceptable
1e1	Number of Informal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			17				Appears Acceptable
1e2	Number of Tier I Facilities Subject to an Informal Enforcement Action (Facility Count)	Data Verification	State			8				Appears Acceptable
1f1	Number of HPVs Identified (Activity Count)	Data Verification	State			1				Appears Acceptable
1f2	Number of Facilities with an HPV Identified (Facility Count)	Data Verification	State			1				Appears Acceptable
1g1	Number of Formal Enforcement Actions Issued to Tier I Facilities (Activity Count)	Data Verification	State			22				Appears Acceptable
1g2	Number of Tier I Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			8				Appears Acceptable
1g3	Number of Formal Enforcement Actions Issued to Tier II Facilities (Activity Count)	Data Verification	State			0				Appears Acceptable
1g4	Number of Tier II Facilities Subject to a Formal Enforcement Action (Facility Count)	Data Verification	State			0				Appears Acceptable
1h1	Total Amount of Assessed Penalties	Data Verification	State			$18,375				Discuss with Agency: appears to be low for issuing 8 formal enforcement actions - see 1g2

1h2	Number of Formal Enforcment Actions with an Assessed Penalty	Data Verification	State			7				Appears Acceptable
1i1	Number of Stack Tests with Passing Results	Data Verification	State			39				Appears Acceptable
1i2	Number of Stack Tests with Failing Results	Data Verification	State			2				Appears Acceptable - there were 2 stack test failures at the same facility.
1i3	Number of Stack Tests with Pending Results	Data Verification	State			0				Appears Acceptable
1i4	Number of Stack Tests with No Results Reported	Data Verification	State			0				Appears Acceptable
1i5	Number of Stack Tests Observed & Reviewed	Data Verification	State			20				Appears Acceptable
1i6	Number of Stack Tests Reviewed Only	Data Verification	State			21				Appears Acceptable
1j	Number of Title V Annual Compliance Certifications Reviewed	Data Verification	State			10				Discuss with Agency:13 T-V facilities had FCEs (see 1b4) but only 10 T-V Certs were reviewed. Were they received after FFY11?
2a	Major Sources Missing CMS Source Category Code	Review Indicator	State			0				Appears Acceptable
3a1	Timely Entry of HPV Determinations	Review Indicator	State			1				Appears Acceptable
3a2	Untimely Entry of HPV Determinations	Goal	State	0		0				Appears Acceptable
3b1	Timely Reporting of Compliance Monitoring Minimum Data Requirements	Goal	State	100%	78.6%	13.2%	5	38	33	Area for Improvement: percentage is well below national average and goal.
3b2	Timely Reporting of Stack Test Minimum Data Requirements	Goal	State	100%	75.5%	24.4%	10	41	31	Area for Improvement: percentage is well below national average and goal.
3b3	Timely Reporting of Enforcement Minimum Data Requirements	Goal	State	100%	76.1%	10.3%	4	39	35	Area for Improvement: percentage is well below national average and goal.
5a	FCE Coverage Major	Goal	State	100%	90%	100%	11	11	0	Meets SRF Requirement
5b	FCE Coverage SM-80	Goal	State	100%	90.6%	100%	14	14	0	Meets SRF Requirement
5c	FCE Coverage Synthetic Minors (non SM-80)	Goal	State	100%	66.7%	0/0	0	0	0	Appears Acceptable - SMs are not part of the CMS plan.
5d	FCE Coverage Minors	Goal	State	100%	11.7%	0/0	0	0	0	Appears Acceptable: Minors are not part of the CMS plan.
5e	Review of Title V Annual Compliance Certifications Completed	Goal	State	100%	72.5%	76.9%	10	13	3	Area for Agency Attention: the percentage is below the national goal but above the national average.
7b1	Alleged Violations Reported Per Informal Enforcement Actions (Tier I only)	Goal	State	100%	62.2%	12.5%	1	8	7	Historically R10 has not advocated changing the compliance status when an informal enforcement action is taken unless it is followed by a formal action.

7b2	Alleged Violations Reported Per Failed Stack Tests	Review Indicator	State		54%	0%	0	1	1	Appears Acceptable: The stack test failure was a HPV with a Day Zero of 9/30/11 (FFY11). The compliance status was changed on 11/2/11 (FFY12 - outside of the review year but within in the MDR of 60 days). The status was changed - just not in the review year.
7b3	Alleged Violations Reported Per HPV Identified	Goal	State	100%	69.6%	0%	0	1	1	Appears Acceptable - SEE finding above.
8a	HPV Discovery Rate Per Major Facility Universe	Review Indicator	State		3.9%	7.7%	1	13	12	Review Indicator but it appears to be acceptable
8b	HPV Reporting Indicator at Majors with Failed Stack Tests	Review Indicator	State		20.5%	100%	1	1	0	Review Indicator but it appears to be acceptable
10a	HPV cases which meet the timeliness goal of the HPV Policy	Review Indicator	State		63.7%	0/0	0	0	0	Appears Acceptable. AFS shows one addressing action in FFY11 (11/23/10) that exceeded 270 days. The day zero was 1/13/10 (FFY10). The only HPV with a day zero in FFY11 was on 9/30/11. Therefore the addressing action date for this HPV is outside of the review period. In summary, the one addressing action in FFY11 was for an HPV that occurred outside of the review period (FFY10).

Resource Conservation and Recovery Act

RCRA Data Metric Analysis from OTIS on 10/02/2012											
Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average	Washington	Count	Universe	Not Counted	Initial Finding	Explanation
1a1	Number of operating TSDFs	Data Verification	State			13				Verified	
1a2	Number of active LQGs	Data Verification	State			448				Verified	
1a3	Number of active SQGs	Data Verification	State			624				Verified	
1a4	All other active sites	Data Verification	State			1856				Verified	
1a5	Number of BR LQGs	Data Verification	State			425				Verified	
1b1	Number of sites inspected	Data Verification	State			348				Verified	
1b2	Number of inspections	Data Verification	State			366				Verified	
1c1	Number of sites with new violations during review year	Data Verification	State			275				Verified	
1c2	Number of sites in violation at any time during the review year regardless of date	Data Verification	State			355				Verified	
1d1	Number of sites with informal enforcement actions	Data Verification	State			269				Verified	
1d2	Number of informal enforcement actions	Data Verification	State			285				Verified	
1e1	Number of sites with new SNC during year	Data Verification	State			4				Verified	
1e2	Number of sites in SNC regardless of determination date	Data Verification	State			15				Verified	
1f1	Number of sites with formal enforcement actions	Data Verification	State			6				Verified	
1f2	Number of formal enforcement actions	Data Verification	State			6				Verified	
1g	Total dollar amount of final penalties	Data Verification	State			$80,240				Verified	
1h	Number of final formal actions with penalty in last 1 FY	Data Verification	State			5				Verified	
2a	Long-standing secondary violators	Review Indicator	State			35				Attention	review longstanding informal cases
5a	Two-year inspection coverage for operating TSDFs	Goal	State	100%	89.4%	69.2%	9	13	4	Attention	missed TSDF inspections in FY 10-11
5b	Annual inspection coverage for LQGs	Goal	State	20%	22.6%	17.9%	76	425	349	Attention	RCRAInfo showed 90 LQG CEIs not limited to BRS 2009 universe
5c	Five-year inspection coverage for LQGs	Goal	State	100%	62.9%	62.4%	265	425	160	Attention	RCRAInfo showed 261 LQG CEIs not limited to BRS 2009 universe
5d	Five-year inspection coverage for active SQGs	Informational Only	State		11%	42.5%	265	624	359	Meets	Exceeds
5e1	Five-year inspection coverage at other sites (CESQGs)	Informational Only	State			225				Verified	
5e2	Five-year inspection coverage at other sites (Transporters)	Informational Only	State			39				Verified	
5e3	Five-year inspection coverage at other sites (Non-notifiers)	Informational Only	State			0				Verified	Change RCRAInfo coding for non-notifiers
5e4	Five-year inspection coverage at other sites (not covered by metrics 5a-5e3)	Informational Only	State			366				Verified	
7b	Violations found during inspections	Review Indicator	State		32.5%	76.7%	264	344	80	Verified	
8a	SNC identification rate	Review Indicator	State		1.6%	.6%	2	344	342	Attention	
8b	Timeliness of SNC determinations	Goal	State	100%	81.7%	100%	4	4	0	Meets	
10a	Timely enforcement taken to address SNC	Review Indicator	State	80%	81.8%	100%	4	4	0	Meets	

Appendix A-1: DMA Supplemental RCRA Information

WASHINGTON RCRA Data Metric 5A: Two Year Inspection Coverage at TSDF			11/6/2012
	Not Inspected FY 10-11		
ID Number	Facility Name	City	Land Type
WAD020257945	BURLINGTON ENVIRONMENTAL LLC TACOMA	TACOMA	Private
WAD990828402	AREVA NP INC	RICHLAND	Private
WAD991281767	BURLINGTON ENVIRONMENTAL LLC KENT	KENT	Private
WAR000010355	PERMA FIX NORTHWEST RICHLAND INC	RICHLAND	Private

WASHINGTON RCRA Data Metric 8A: SNC Identification Rate								11/5/2012
ID Number	Facility Name	City	Land Type	Number of Inspections	Example Evaluation Owner	Example Evaluation Type	Example Inspection Date	Example Citizen Complaint
WAD009253089	PROFESSIONAL COATINGS	TACOMA	Private	1	HQ	SNY	2011/02/0	N
WAD980978803	AQUATIC CO	YELM	Private	1	HQ	SNY	2011/04/2	N

WASHINGTON RCRA Datea Metric 8B: Timeliness of SNC Determinations							11/5/2012
ID Number	Facility Name	City	Days to SNC	Evaluation Type	Evaluation Start Date	Inspection Fiscal Year	Evaluation Agency
WAD009253089	PROFESSIONAL COATINGS	TACOMA	0	SNY	01-FEB-11	2011	S
WAD050967926	SW WASHINGTON MEDICAL CENTER	VANCOUVER	0	SNY	23-MAR-11	2011	S
WAD980978803	AQUATIC CO	YELM	0	SNY	27-APR-11	2011	S
WAH000011387	HISTORIC RECLAMATION	SEATTLE	0	SNY	04-APR-11	2011	S

Appendix B: File Metric Analysis

This section presents file metric values with EPA's initial observations on program performance. Initial findings are developed by EPA at the conclusion of the file review.

Initial findings are Statements of fact about observed performance. They should indicate whether there is a potential issue and the nature of the issue. They are developed after comparing the data metrics to the file metrics and talking to the State.

Final findings are presented above in the CWA, CAA, and RCRA Findings sections.

Because of limited sample size, statistical comparisons among programs or across States cannot be made.

Clean Water Act

State: Washington Dept of Ecology

Year Reviewed: FY 2011

CWA Metric #	Description	Numerator	Denominator	Metric Value	Goal	Initial Findings	Details
2b	**Files reviewed where data are accurately reflected in the national data system:** Percentage of files reviewed where data in the file are accurately reflected in the national data systems	27	34	79.4%	95%	State Improvement	Washington is currently working to get their data into the national system. They should be done by April 2013.
3a	**Timeliness of mandatory data entered in the national data system**	0	34	0.0%	100%	State Improvement	Washington is currently working to get their data into the national system. They should be done by April 2013.
4a1	**Pretreatment compliance inspections and audits**	7	6	116.7%	100%	Meets Requirements	
4a2	**Significant industrial user (SIU) inspections for SIUs discharging to non-authorized POTWs**	59	59	100.0%	100%	Meets Requirements	

4a3	**EPA and State oversight of SIU inspections by approved POTWs**	2	2	100.0%	100%	Meets Requirements	
4a4	**Major CSO inspections**	5	5	100.0%	100%	Meets Requirements	
4a5	**SSO inspections**	4	4	100.0%	100%	Meets Requirements	
4a6	**Phase I MS4 audits or inspections**	0	0	#DIV/0!	100%		Did not evaluate this
4a7	**Phase II MS4 audits or inspections**	0	0	#DIV/0!	100%		Did not evaluate this
4a8	**Industrial stormwater inspections**	406	100	406.0%	100%	Meets Requirements	
4a9	**Phase I and II stormwater construction inspections**	722	100	722.0%	100%	Meets Requirements	
4a10	**Inspections of large and medium NPDES-permitted CAFOs**	8	8	100.0%	100%	Meets Requirements	
4a11	**Inspections of non-permitted CAFOs**	0	0	N/A	N/A		Did not evaluate this
4b	**Planned commitments completed:** CWA compliance and enforcement commitments other than CMS commitments, including work products/commitments in PPAs, PPGs, grant agreements, MOAs, MOUs or other relevant agreements	4	4	100.0%	100%	Meets Requirements	

6a	**Inspection reports reviewed that provide sufficient documentation to determine compliance at the facility**	31	31	100.0%	100%	Meets Requirements	
6b	**Inspection reports completed within prescribed timeframe:** Percentage of inspection reports reviewed that are timely	28	31	90.3%	100%	Meets Requirements	
7e	**Inspection reports reviewed that led to an accurate compliance determination**	31	31	100.0%	100%	Meets Requirements	
8b	**Single-event violation(s) accurately identified as SNC or non-SNC**	1	8	12.5%	100%	State Improvement	The State needs to start entering SEVs into their data system.
8c	**Percentage of SEVs Identified as SNC Reported Timely:** Percentage of SEVs accurately identified as SNC that were reported timely	0	7	0.0%	100%	State Improvement	The State needs to start entering SEVs into their data system.
9a	**Percentage of enforcement responses that return or will return source in SNC to compliance**	19	20	95.0%	100%	Meets Requirements	
10b	**Enforcement responses reviewed that address SNC that are appropriate to the violations**	19	20	95.0%	100%	Meets Requirements	
11a	**Penalty calculations that include gravity and economic benefit:** Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	7	9	77.8%	100%	State Attention	There were two enforcement actions that did not evaluate economic benefit. This is much improved over the last SRF in which a very small number of enforcement actions included economic benefit
12a	**Documentation on difference between initial and final penalty:** Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	2	2	100.0%	100%	Meets Requirements	

12b	**Penalties collected:** Percentage of penalty files reviewed that document collection of penalty	7	9	77.8%	100%	State Improvement	There were 2 files that did not have proper documentation.

Finding Categories

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, and are innovative and noteworthy, and can serve as models for other States.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern or problem. Generally, States are meeting expectations when falling between 91 to 100 percent of a national goal.

Area for State Attention: The State has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires State attention when the State falls between 85 to 90 percent of a national goal.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires State improvement when the State falls below 85 percent of a national goal.

Instructions:

Numerator/Denominator/Metric Value: Pulls values automatically from other spreadsheets.

Initial Findings: Choose one of four finding categories listed in the drop-down menu.

Details: Provide additional details to substantiate the initial finding.

Clean Air Act

Ecology

Year Reviewed: FY 2011

CAA Metric #	CAA File Review Metric Description	Numerator	Denominator	Percentage	Goal	Initial Findings	Details
2b	**Accurate MDR data in AFS:** Percentage of files reviewed where MDR data are accurately reflected in AFS	10	15	66.7%	100%	State Improvement	

4a1	**Planned evaluations completed:** Title V Major FCEs	10	10	100.0%	100%	Meets Requirements	
4a2	**Planned evaluations completed:** SM-80 FCEs	10	10	100.0%	100%	Meets Requirements	
4a3	**Planned evaluations completed:** Synthetic Minor FCEs	0	0	#DIV/0!	100%		No commitment
4a4	**Planned evaluations completed:** Other Minor FCEs	0	0	#DIV/0!	100%		No commitment
4a5	**Planned evaluations completed:** Title V Major PCEs	0	0	#DIV/0!	100%		No commitment
4a6	**Planned evaluations completed:** SM-80 PCEs	0	0	#DIV/0!	100%		No commitment
4a7	**Planned evaluations completed:** Synthetic Minor PCEs	0	0	#DIV/0!	100%		No commitment
4a8	**Planned evaluations completed:** Other Minor PCEs	0	0	#DIV/0!	100%		No commitment
4b	**Planned commitments completed:** CAA compliance and enforcement commitments other than CMS commitments	3	3	100.0%	100%	Meets Requirements	
6a	**Documentation of FCE elements:** Percentage of FCEs in the files reviewed that meet the definition of a FCE per the CMS policy	8	9	88.9%	100%	State Attention	
6b	**Compliance Monitoring Reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility:** Percentage of CMRs or facility files reviewed that provide sufficient documentation to determine facility compliance	13	14	92.9%	100%	Meets Requirements	
7a	**Accuracy of compliance determinations:** Percentage of CMRs or facility files reviewed that led to accurate compliance determinations	14	15	93.3%	100%	Meets Requirements	

8c	**Accuracy of HPV determinations:** Percentage of violations in files reviewed that were accurately determined to be HPVs	6	7	85.7%	100%	State Attention
9a	**Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame:** Percentage of formal enforcement responses reviewed that include required corrective actions that will return the facility to compliance in a specified time frame	5	5	100.0%	100%	Meets Requirements
10a	**Timely action taken to address HPVs:** Percentage of HPV addressing actions that meet the timeliness standard in the HPV Policy	1	1	100.0%	100%	Meets Requirements
10b	**Appropriate Enforcement Responses for HPVs:** Percentage of enforcement responses for HPVs that appropriately address the violations	1	1	100.0%	100%	Meets Requirements
11a	**Penalty calculations reviewed that consider and include gravity and economic benefit:** Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	5	5	100.0%	100%	Meets Requirements
12a	**Documentation on difference between initial and final penalty and rationale:** Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	5	5	100.0%	100%	Meets Requirements
12b	**Penalties collected:** Percentage of penalty files reviewed that document collection of penalty	5	5	100.0%	100%	Meets Requirements

Finding Category Descriptions

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, and are innovative and noteworthy, and can serve as models for other states.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern or problem. Generally, states are meeting expectations when falling between 91 to 100 percent of a national goal.

Area for State Attention: The state has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires state attention when the state falls between 85 to 90 percent of a national goal.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires state improvement when the state falls below 85 percent of a national goal.

Instructions:

Numerator, Denominator, Percentage: Pulls values automatically from other worksheets.
Initial Findings: Choose one of four finding categories listed in the drop-down menu.
Details: Provide additional details to substantiate the initial finding.

Puget Sound Clean Air Agency							**Year Reviewed: FY 2011**
CAA Metric #	**CAA File Review Metric Description**	**Numerator**	**Denominator**	**Percentage**	**Goal**	**Initial Findings**	**Details**
2b	**Accurate MDR data in AFS:** Percentage of files reviewed where MDR data are accurately reflected in AFS	19	20	95.0%	100%	Meets Requirements	
4a1	**Planned evaluations completed:** Title V Major FCEs	36	33	109.1%	100%	Meets Requirements	
4a2	**Planned evaluations completed:** SM-80 FCEs	72	14	514.3%	100%	Meets Requirements	
4a3	**Planned evaluations completed:** Synthetic Minor FCEs	0	0	#DIV/0!	100%		
4a4	**Planned evaluations completed:** Other Minor FCEs	0	0	#DIV/0!	100%		
4a5	**Planned evaluations completed:** Title V Major PCEs	0	0	#DIV/0!	100%		
4a6	**Planned evaluations completed:** SM-80 PCEs	0	0	#DIV/0!	100%		

4a7	**Planned evaluations completed:** Synthetic Minor PCEs	0	0	#DIV/0!	100%		
4a8	**Planned evaluations completed:** Other Minor PCEs	0	0	#DIV/0!	100%		
4b	**Planned commitments completed:** CAA compliance and enforcement commitments other than CMS commitments	NA	NA	NA	100%	Meets Requirements	R10 comment: EPA and the Puget Sound Clean Air Agency do not have any formal CAA compliance and enforcement commitments other than CMS commitments for FY11.
6a	**Documentation of FCE elements:** Percentage of FCEs in the files reviewed that meet the definition of a FCE per the CMS policy	19	19	100.0%	100%	Meets Requirements	
6b	**Compliance Monitoring Reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility:** Percentage of CMRs or facility files reviewed that provide sufficient documentation to determine facility compliance	19	19	100.0%	100%	Meets Requirements	
7a	**Accuracy of compliance determinations:** Percentage of CMRs or facility files reviewed that led to accurate compliance determinations	20	20	100.0%	100%	Meets Requirements	
8c	**Accuracy of HPV determinations:** Percentage of violations in files reviewed that were accurately determined to be HPVs	13	13	100.0%	100%	Meets Requirements	
9a	**Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame:** Percentage of formal enforcement responses reviewed that include required corrective actions that will return the facility to compliance in a specified time frame	9	9	100.0%	100%	Meets Requirements	

10a	**Timely action taken to address HPVs:** Percentage of HPV addressing actions that meet the timeliness standard in the HPV Policy	1	6	16.7%	100%	State Improvement	
10b	**Appropriate Enforcement Responses for HPVs:** Percentage of enforcement responses for HPVs that appropriately address the violations	6	6	100.0%	100%	Meets Requirements	
11a	**Penalty calculations reviewed that consider and include gravity and economic benefit:** Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	8	8	100.0%	100%	Meets Requirements	
12a	**Documentation on difference between initial and final penalty and rationale:** Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	6	6	100.0%	100%	Meets Requirements	
12b	**Penalties collected:** Percentage of penalty files reviewed that document collection of penalty	7	7	100.0%	100%	Meets Requirements	

Finding Category Descriptions

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, and are innovative and noteworthy, and can serve as models for other states.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern or problem. Generally, states are meeting expectations when falling between 91 to 100 percent of a national goal.

Area for State Attention: The state has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires state attention when the state falls between 85 to 90 percent of a national goal.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires state improvement when the state falls below 85 percent of a national goal.

Southwest Clean Air Agency

Year Reviewed: FY 2011

CAA Metric #	CAA File Review Metric Description	Numerator	Denominator	Percentage	Goal	Initial Findings	Details
2b	**Accurate MDR data in AFS:** Percentage of files reviewed where MDR data are accurately reflected in AFS	6	15	40.0%	100%	State Improvement	WaferTech - Two source tests conducted in 2011 were not included in compliance history. Also, there were duplicate entries on the DFR. Emerald - Records for PCE on 5/19 and 5/28 not found in file. Hampton Lumber - Two entries on 11/3/2010. One is PCE one is FCE. No record for FCE. Agency is entering onsite FCE when onsite PCE and off site reviews are completed. Chehalis Power - No record of of onsite FCE on 3/23/2011. Cardinal - One duplicate entry for a PCE on 5/4/20111. Hampton, Randle - No inspection report associated with entry for PCE dated 9/8/2011. No EI or annual review with this date either. Sierra Pacific - No records for 5/11/2011 entry found. PCE date of 4/30/2011 may actually be 4/20/2011. Hardell - Entries on 5/5/2011 and 10/15/2010 seem to be duplicated. NOV date 4/5/2011 is not on DFR. Dates for 4852 NOC and NOV seem to be wrong. Transalta - No documentation for entry dated 8/13/2011. Unable to verify what action occurred on 12/3/2010.
4a1	**Planned evaluations completed:** Title V Major FCEs	11	11	100.0%	100%	Meets Requirements	
4a2	**Planned evaluations completed:** SM-80 FCEs	13	13	100.0%	100%	Meets Requirements	
4a3	**Planned evaluations completed:** Synthetic Minor FCEs	0	0	#DIV/0!	100%	Meets Requirements	
4a4	**Planned evaluations completed:** Other Minor FCEs	0	0	#DIV/0!	100%	Meets Requirements	
4a5	**Planned evaluations completed:** Title V Major PCEs	0	0	#DIV/0!	100%	Meets Requirements	
4a6	**Planned evaluations completed:** SM-80 PCEs	0	0	#DIV/0!	100%	Meets Requirements	

4a7	**Planned evaluations completed:** Synthetic Minor PCEs	0	0	#DIV/0!	100%	Meets Requirements	
4a8	**Planned evaluations completed:** Other Minor PCEs	0	0	#DIV/0!	100%	Meets Requirements	
4b	**Planned commitments completed:** CAA compliance and enforcement commitments other than CMS commitments	Enter # of Yes Responses Here	Enter Total # of Responses Here	#VALUE!	100%	Meets Requirements	
6a	**Documentation of FCE elements:** Percentage of FCEs in the files reviewed that meet the definition of a FCE per the CMS policy	15	15	100.0%	100%	Meets Requirements	
6b	**Compliance Monitoring Reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility:** Percentage of CMRs or facility files reviewed that provide sufficient documentation to determine facility compliance	15	15	100.0%	100%	Meets Requirements	
7a	**Accuracy of compliance determinations:** Percentage of CMRs or facility files reviewed that led to accurate compliance determinations	15	15	100.0%	100%	Meets Requirements	
8c	**Accuracy of HPV determinations:** Percentage of violations in files reviewed that were accurately determined to be HPVs	5	5	100.0%	100%	Meets Requirements	
9a	**Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame:** Percentage of formal enforcement responses reviewed that include required corrective actions that will return the facility to compliance in a specified time frame	7	7	100.0%	100%	Meets Requirements	
10a	**Timely action taken to address HPVs:** Percentage of HPV addressing actions that meet the timeliness standard in the HPV Policy	2	2	100.0%	100%	Meets Requirements	Addressing action due outside of the review period but completed within requisite timeframe.

10b	**Appropriate Enforcement Responses for HPVs:** Percentage of enforcement responses for HPVs that appropriately address the violations	2	2	100.0%	100%	Meets Requirements	
11a	**Penalty calculations reviewed that consider and include gravity and economic benefit:** Percentage of penalty calculations reviewed that consider and include, where appropriate, gravity and economic benefit	1	4	25.0%	100%	State Improvement	WaferTech - No evaluation of EB found. Hardell - "Standard" assessment doesn't mention EB. Transalta - No mention of EB
12a	**Documentation on difference between initial and final penalty and rationale:** Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	0	0	#DIV/0!	100%	Meets Requirements	No adjustments to penalties were found during review.
12b	**Penalties collected:** Percentage of penalty files reviewed that document collection of penalty	4	4	100.0%	100%	Meets Requirements	

Finding Category Descriptions

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, and are innovative and noteworthy, and can serve as models for other states.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern or problem. Generally, states are meeting expectations when falling between 91 to 100 percent of a national goal.

Area for State Attention: The state has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires state attention when the state falls between 85 to 90 percent of a national goal.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires state improvement when the state falls below 85 percent of a national goal.

Instructions:

Numerator, Denominator, Percentage: Pulls values automatically from other worksheets.

Initial Findings: Choose one of four finding categories listed in the drop-down menu.

Details: State reasons for the initial finding.

Resource Conservation and Recovery Act

State: Washington Dept of Ecology

RCRA Metric #	Name and Description	Numerator	Denominator	Metric %	Goal	Initial Findings	Details
2b	**Accurate entry of mandatory data:** Percentage of files reviewed where mandatory data are accurately reflected in the national data system	25	35	71.4%	100%	Area for Attention	Infrequent Data Discrepancies
3a	**Timely entry of mandatory data:** Percentage of files reviewed where mandatory data are entered in the national data system in a timely manner	34	35	97.1%	100%	Meets Requirements	Above 95% threshold
4a	**Planned non-inspection commitments completed:** Percentage of non-inspection commitments completed in the review year	4	4	100.0%	100%	Meets Requirements	Achieved PPA goals
4b1	**Planned inspections completed:** LQGs	0	0	#DIV/0!	100%		NA
4b2	**Planned inspections completed:** SQGs	0	0	#DIV/0!	100%		NA
4b3	**Planned inspections completed:** CESQGs	0	0	#DIV/0!	100%		NA
4b4	**Planned inspections completed:** Transporters	0	0	#DIV/0!	100%		NA
6a	**Inspection reports complete and sufficient to determine compliance:** Percentage of inspection reports reviewed that are complete and provide sufficient documentation to determine compliance	29	44	65.9%	N/A	Area for Improvement	Frequent problems; missing inspection reports for 7 of 44 files. Recommend using other evaluation type (e.g., CAV) when no report is written and filed.
6b	**Timeliness of inspection report completion:** Percentage of inspection reports reviewed that are completed in a timely manner	30	44	68.2%	100%	Area for Improvement	This measure significantly lags the goal for timeliness. In addition to the 7 missing reports in 6a, 7 determinations were later than 150 days (4 in the Industrial Office)
7a	**Accurate compliance determinations:** Percentage of inspection reports reviewed that led to accurate compliance determinations	34	37	91.9%	100%	Area for Attention	Accurate determinations with high violation rate but low SNC rate

8c	**Appropriate SNC determinations:** Percentage of files reviewed in which significant noncompliance (SNC) status was appropriately determined during the review year	28	28	100.0%	100%	Meets Requirements	All files we reviewed had appropriate determinations and there were few SNC violators in this sample
9a	**Enforcement that returns SNC sites to compliance:** Percentage of enforcement responses that have returned or will return a site in SNC to compliance	5	5	100.0%	100%	Meets Requirements	All cases addressed
9b	**Enforcement that returns SV sites to compliance:** Percentage of enforcement responses that have returned or will return a secondary violator to compliance	22	22	100.0%	100%	Meets Requirements	Informal enforcement was successful
10b	**Appropriate enforcement taken to address violations:** Percentage of files with enforcement responses that are appropriate to the violations	27	27	100.0%	100%	Meets Requirements	All responses appropriate
11a	**Penalty calculations include gravity and economic benefit:** Percentage of reviewed penalty calculations that consider and include, where appropriate, gravity and economic benefit	4	5	80.0%	100%	Area for Attention	One probelm case and a small sample size indicated a problem in applying gravity and economic benefit that needs some attention
12a	**Documentation on difference between initial and final penalty:** Percentage of penalties reviewed that document the difference between the initial and final assessed penalty, and the rationale for that difference	3	4	75.0%	100%	Area for Attention	One expedited settlement that reduced the penalty substantially was not explained in the file
12b	**Penalties collected:** Percentage of files that document collection of penalty	3	5	60.0%	100%	Area for Attention	Installment payments need to be tracked. After the first payment was made, attention needed to follow up on installments.

Finding Categories

Good Practice: Activities, processes, or policies that the SRF metrics show are being implemented at the level of Meets Expectations, and are innovative and noteworthy, and can serve as models for other States.

Meets Expectations: Describes a situation where either: a) no performance deficiencies are identified, or b) single or infrequent deficiencies are identified that do not constitute a pattern or problem. Generally, States are meeting expectations when falling between 91 to 100 percent of a national goal.

Area for State Attention: The State has single or infrequent deficiencies that constitute a minor pattern or problem that does not pose a risk to human health or the environment. Generally, performance requires State attention when the State falls between 85 to 90 percent of a national goal.

Area for State Improvement: Activities, processes, or policies that SRF data and/or file metrics show as major problems requiring EPA oversight. These will generally be significant recurrent issues. However, there may be instances where single or infrequent cases reflect a major problem, particularly in instances where the total number of facilities under consideration is small. Generally, performance requires State improvement when the State falls below 85 percent of a national goal.

Instructions:

Metric Value: Pulls values automatically from other spreadsheets.

Initial Findings: Choose one of four finding categories listed in the drop-down menu.

Details: Provide additional details to substantiate the initial finding.

Appendix C: File Selection

Files are selected according to a standard protocol using a web-based file selection tool. These are designed to provide consistency and transparency to the process. Based on the description of the file selection process below, States should be able to recreate the results in the table.

Clean Water Act

File Selection Process

- In order to find out how many files need to be reviewed during the SRF process Region 10 needs to know the total universe of NPDES permits. According to Ecology, there are 4,112 permits. Given this number of permits, the SRF File Selection Protocol calls for Region 10 to review between 35 and 40 files. Region 10 selected 35 files according to the Protocol, but was only able to include review of 34 of these files; one of the files selected and pulled for review was inappropriate for review, as the particular facility did not have the NOV (or any other inspection or enforcement activity in FY 2011) shown in the State system. (The NOV should have been coded to a different facility.)
- From the file pool, Region 10 followed the SRF Protocol to randomly include 5 facilities with informal enforcement actions, 5 facilities with formal enforcement actions, 5 facilities with penalties, and 10 facilities with only inspection activities during the FY 2011 review period. To obtain the full 35 files, another 5 facilities with inspections only and another 5 facilities with both an inspection and an enforcement action during the review period were selected.

File Selection Table

Permit Number	Water Quality Name	City	Zip Cd	Major/minor	Inspection	Violation	SEV	SNC	Informal Enforcement	Formal Enforcement	Penalty
WA0020419	Richland POTW	Richland	99352	Major	1	0	0	0	0	0	0
WA0052434	BUCKHORN MOUNTAIN MINE	Chesaw	-	Minor	1	13	0	0	0	0	$22,000
WAG135011	EASTBANK HATCHERY	East Wenatchee	98802	Minor	3	0	0	0	0	0	0
WAG435061	Borton & Sons Zillah Plant	Zillah	98953	Minor	0	2	0	0	1	0	0
WA0020559	PATEROS POTW	Pateros	98846	Minor	1	1	0	0	0	0	0
WA0050482	Lyle POTW	Lyle	98635	Mionr	1	0	0	0	0	0	0
WA0050474	Vantage POTW	Vantage	98950	Minor	1	0	0	0	0	0	0

WAG500019	NORTH CENTRAL CONSTRUCTION CRUSHER1	Moses Lake	98837	Minor	1	2	0	0	0	0	0
WA0003697	BOISE CASCADE WALLULA	Wallula	99363	Major	4	1	0	0	0	0	0
WA0000078	LONGVIEW FIBRE PAPER & PACKAGING	Longview	98632	Major	1	1	0	0	0	0	$1,000
WA0000809	Cosmo Specialty Fibers, Inc.	Cosmopolis	98537	Major	0	0	0	0	0	0	$500
WA0020435	EVERSON STP	Everson	98247	Minor	1	3	0	0	1	0	0
WA0002470	DARIGOLD LYNDEN PLANT	Lynden	98264	Minor	1	10	0	0	0	0	$22,000
WA0030996	STABBERT YACHT & SHIP LLC	Seattle	98107	Minor	1	1	0	0	0	0	0
WAG440001	Bel-Lyn Farms LLC	Lynden	98264	Minor	0	0	0	0	0	0	$4,506
WAR000056	CERTAINTEED GYPSUM MANUFACTURING	Seattle	98134	Minor	0	4	0	0	0	1	0
WAR007318	JERSTEDT LUMBER CO INC	Bellingham	98226	Minor	0	0	0	0	0	0	$3,000
WAR011242	SNOQUALMIE FALLS HYDROELECT PROJECT	Snoqualmie	98024	Minor	0	3	0	0	0	1	0
WAR011491	WA DOT SR305 BJORGEN CREEK FISH PASS	Poulsbo	98370	Mionr	0	1	0	0	0	0	$4,000
WA0022527	King County Vashon WWTP	Vashon	98070	Minor	0	2	0	0	1	0	0
WA0030317	KITSAP COUNTY SEWER DISTRICT 7 WWTP	Bainbridge Island	98110	Minor	1	6	0	0	0	0	0
WA0001546	TRANSALTA CENTRALIA GENERATION LLC	Centralia	98531	Major	0	2	0	0	1	0	0
WA0022918	BRADKEN INC	Tacoma	98409	Minor	1	0	0	0	0	0	0
WA0023345	SHELTON STP	Shelton	98584	Major	0	30	0	0	1	0	0
WA0037214	TACOMA NORTH NO 3	Tacoma	98407	Major	1	0	0	0	0	0	0
WA0037788	THREE RIVERS REGIONAL WASTEWATER	Longview	98632	Major	1	2	0	0	0	0	0
WAG031027	PORT OF PORT ANGELES BOATYARD	Port Angeles	98362	Minor	1	1	0	0	0	0	0
WAG501539	Port of Tacoma - Walrath Recycle Yard	Tacoma	98422	Minor	2	1	0	0	0	0	0
WAR000018	SIMON METALS	Tacoma	98421	Minor	4	3	0	0	0	0	0
WAR001497	JESSE YARD II	Tacoma	98421	Minor	1	0	0	0	0	0	$2,000
WAR003300	PUGET SOUND WOOD PRODUCTS HIDDEN VA	Montesano	98653	Minor	1	10	0	0	0	0	$2,600
WAR044002	PIERCE COUNTY SW	Tacoma	98402	Minor	0	0	0	0	0	1	0
WAR125037	Lacey Auto Recycling	Lacey	98506	Minor	0	0	0	0	0	1	0

Clean Air Act

File Selection Process

- For the Washington Department of Ecology, the universe of sources that had some type of compliance monitoring or enforcement activity in FY11 was 35. The State of Washington has four regional offices that regulate air sources. One of the regional offices regulates only one source and that office was not part of the Air file review. An attempt was made to review a representative sample of files from each of the other three regions based on the number of sources they regulate and the amount of 'activity' that occurred in FY11. Region 10 followed the SRF file selection protocol, using the OTIS online selection tool in consultation with EPA Headquarters, to select 15 files to review. Five of the 15 files contained an enforcement action and the remaining files contained a compliance monitoring activity.
- For the Puget Sound Clean Air Agency, the universe of sources that had some type of compliance monitoring or enforcement activity in FY11 was 235. Region 10 followed the SRF file selection protocol, using the OTIS online selection tool in consultation with EPA Headquarters, to select 20 files to review. Of the 20 files, 13 contained multiple activities (i.e., FCE conducted and an enforcement action taken). Twelve of the files contained an enforcement action and 8 files contained a compliance monitoring activity.
- For the Southwest Clean Air Agency, the universe of sources that had some type of compliance monitoring or enforcement activity in FY11 was 29. Region 10 followed the SRF file selection protocol, using the OTIS online selection tool in consultation with EPA Headquarters, to select 15 files to review. Of the 15 files, 8 files contained an enforcement activity in addition to a compliance monitoring activity in 7 of the 8 enforcement files. Seven of the non-enforcement files reviewed contained a compliance monitoring activity.

File Selection Table

ECOLOGY -- FILE SELECTION

5/8/2012

Name	Program ID	City	State	Zip	FCE	PCE	Violation	Stack Test Failure	Title V Deviation	HPV	Informal Action	Formal Action	Penalty	Universe
Central Regional Office														
GOLDENDALE GENERATING STATION	5303903966	GOLDENDALE	WA	98620	0	0	0	0	1	0	0	0	0	MAJR
SDS LUMBER CO	5303900002	BINGEN	WA	98605	0	0	3	0	1	0	0	0	0	MAJR
ZOSEL LUMBER CO	5304700015	OROVILLE	WA	98844	0	0	4	0	0	0	0	0	0	SM80

Eastern Regional Office														
BASIC AMERICAN FOODS	5302500013	MOSES LAKE	WA	98837	2	0	0	0	0	0	0	0	0	SM80
D&L FOUNDARY & SUPPLY INC	5302500020	MOSES LAKE	WA	98837	1	0	0	0	0	0	0	0	0	SM80
GAS TRANSMISSION NORTHWEST #7	5307100026	STARBUCK	WA	99359	1	0	0	0	0	0	0	0	0	MAJR
GENIE INDUSTRIES	5302500019	MOSES LAKE	WA	98837	1	0	0	0	0	0	0	0	0	SM80
J R SIMPLOT	5302500011	MOSES LAKE	WA	98837	1	0	0	0	0	0	0	0	0	SM80
PONDERAY NEWSPRINT CO	5305100003	USK	WA	99180	1	0	0	0	0	0	0	0	0	MAJR
REC SOLAR GRADE SILICON, LLC;	5302500018	MOSES LAKE	WA	98837	1	0	0	0	0	0	2	1	10,000	SM80
Industrial Section														
ALCOA WENATCHEE WORKS	5300700001	WENATCHEE	WA	98828	1	1	0	0	1	0	0	0	0	MAJR
INTALCO ALUMINUM	5307300001	FERNDALE	WA	98248	1	1	0	0	1	0	0	0	0	MAJR
KIMBERLY CLARK TISSUE CO EVERETT	5306100002	EVERETT	WA	98201	0	1	0	0	1	0	1	1	2,000	MAJR
LONGVIEW FIBRE	5301500002	LONGVIEW	WA	98632	0	0	0	0	1	0	1	1	3,000	MAJR
SIMPSON TACOMA KRAFT CO	5305300008	TACOMA	WA	98421	0	0	0	1	0	0	2	2	9,000	MAJR

Puget Sound Clean Air Agency - File Selection

8/2/2012

ID Number	Facility Name	City	State	ZIP	Universe	FCE	Stack Tests Failed	Violations	HPVs	Informal Actions	Formal Actions	Penalties
5303300157	BERRY PLASTICS CORPORATION	KENT	WA	98032	Major	1	0	1	0	0	0	0
5306100265	BLUESCOPE BUILDINGS N.A., INC	ARLINGTON	WA	98223	Synthetic Minor	1	0	0	0	2	0	0
5305300177	BOEING COMMERCIAL AIRPLANE, FREDERICKSON	PUYALLUP	WA	98373	Major	1	0	0	0	1	0	0
5303300374	COATINGS UNLIMITED INC	KENT	WA	98032	Synthetic Minor	1	0	0	0	0	1	3000
5305300499	DELTA PREFINISHING CORP	LAKEWOOD	WA	98499	Synthetic Minor	1	0	0	0	1	0	0
5303300873	FRANZ SEATTLE DIVISION - WELLER ST.	SEATTLE	WA	98144	Major	1	0	0	0	0	0	0
5305328515	GARDNER-FIELDS, INC	TACOMA	WA	98421	Tier II Minor	0	0	0	0	0	3	35000
5305300820	GRAYMONT WESTERN US INC	TACOMA	WA	98421	Major	1	0	1	0	1	0	0
5303300319	INSULFOAM DIV OF CARLISLE CONSTRUCTION M	KENT	WA	98032	Major	1	0	0	0	0	0	0

5303310116	INTERNATIONAL PAPER	BELLEVUE	WA	98005	Synthetic Minor	1	0	0	0	0	0	0
5303300138	KING CO NTRL RES WASTEWATER TREATMENT	SEATTLE	WA	98199	Major	1	0	1	0	18	0	0
5305318342	MILES RESOURCES - SUMNER FACILITY	SUMNER	WA	98390	Synthetic Minor	1	0	0	0	0	0	0
5305311993	PIERCE CO RECYCLING COMPOSTING AND DISPO	GRAHAM	WA	98338	Major	1	0	0	0	0	0	0
5305300028	PUGET SOUND ENERGY, FREDERICKSON	TACOMA	WA	98446	Major	1	0	0	0	0	0	0
5303300004	SAINT-GOBAIN CONTAINERS, INC (VERALLIA)	SEATTLE	WA	98134	Major	1	2	1	0	7	4	25000
5305321332	SHORE TERMINALS LLC	TACOMA	WA	98421	Synthetic Minor	1	0	0	0	1	0	0
5303300612	STRASSER WOODENWORKS INC	WOODINVILLE	WA	98072	Synthetic Minor	1	0	0	0	0	0	0
5303521177	US NAVY PUGET SOUND NAVAL SHIPYARD PSNS	BREMERTON	WA	98314	Major	1	0	0	0	11	3	4000
5305300022	US OIL & REFINING CO	TACOMA	WA	98421	Major	1	0	1	2	6	11	36000
5303300023	WASHINGTON UNIVERSITY OF POWER PLANT &	SEATTLE	WA	98195	Major	1	1	0	0	3	1	22000

SouthWest Clean Air Agency 8/8/12

ID Number	Facility Name	City	State	ZIP	Universe	FCE	Stack Tests Failed	Violations	HPVs	Informal Actions	Formal Actions	Penalties
5301100079	THOMPSON METAL FABRICATION	VANCOUVER	WA	98661	Synthetic Minor	1	0	0	0	0	0	0
5301100125	COLUMBIA MACHINE, INC.	VANCOUVER	WA	98668	Synthetic Minor	1	0	0	0	0	0	0
5301100143	ERSHING, INC - ATTBAR DIVISION	RIDGEFIELD	WA	98642	Synthetic Minor	1	0	1	0	0	0	0
5301100150	CLARK PU RIVER ROAD GENERATING PROJECT	VANCOUVER	WA	98668	Major	1	0	1	0	0	0	0
5301100154	MERCURY PLASTICS, INC	VANCOUVER	WA	98661	Synthetic Minor	1	0	1	0	0	0	0

5301100155	WAFERTECH	CAMAS	WA	98607	Major	2	0	0	0	1	2	7875
5301500009	EMERALD KALAMA CHEMICAL LLC	KALAMA	WA	98625	Major	1	0	0	0	1	2	0
5304100003	HAMPTON LUMBER MILLS - MORTON	MORTON	WA	98356	Major	1	0	0	0	1	1	0
5304100005	CHEHALIS POWER LP/CHEHALIS GEN. FACILITY	CHEHALIS	WA	98532	Major	1	0	0	0	0	0	0
5304100006	CARDINAL FG COMPANY	WINLOCK	WA	98596	Major	1	0	0	0	7	6	0
5304100009	HAMPTON LUMBER MILLS - RANDLE	RANDLE	WA	98377	Major	1	0	1	0	2	2	4000
5304100022	SIERRA PACIFIC, INDUSTRIES	CENTRALIA	WA	98531	Major	0	0	0	0	1	1	0
5304100046	TRANSALTA CENTRALIA MINING LLC	CENTRALIA	WA	98531	Major	1	0	0	0	0	0	0
5304100054	HARDEL MUTUAL PLYWOOD CORPORATION	CHEHALIS	WA	98532	Synthetic Minor	1	0	0	0	3	4	1000
5304110010	TRANS ALTA CENTRALIA, LL (PACIFICCOR)	CENTRALIA	WA	98531	Major	1	2	0	1	1	4	5500

Resource Conservation and Recovery Act

File Selection Process

- The RCRA Universe in Washington State was between 301 and 1000 in FY 2011. Region 10 selected the high end of the file selection range, 35 facilities, in order to get a sample of files from all six (ERO, CRO, NWRO, SWRO, IND and NWP) of the Ecology regional and program offices that implement the RCRA program.
- Region10 selected a minimum of 5 facilities for every activity, per the SRF File Selection Protocol. This was problematic due to the small number of enforcement activities in Washington and meant that we had to select all of the facilities that were new SNC (4), formal enforcement actions (5) and penalties (5), rather than just a sample from these activities. We weighted our selection toward large regulated facilities, TSDFs (7 of 17) and LQGs (11 of 96) in order to focus on facilities likely to have more substantial files.
- We used the interactive file selection feature in OTIS and created a worksheet to sort files by regional and program office to ensure an even distribution of files to review Statewide. Based on relative activity levels between the different offices, we selected a minimum number of 4 of 16 files in the Central Region and 10 of 185 in the Northwest Region. We also selected the US Department of Energy Hanford Facility because it is the main work of the Nuclear Waste Program office and included multiple inspections during the year.
- In our Data Metric Analysis, we found data metric 7.b. to be problematic. Therefore our initial file selection approach was to further investigate the issue of a large percentage of secondary violators and a low percentage of Significant Non-Compliers. We made a sufficient sample of SNC files (75%), formal actions (66%) and penalties (60%) in order to be able to turn our attention to reviewing more files with violations found but with no SNC designation, formal enforcement or penalty (95% or 21 of 22 violations found with no SNC designation, formal action or penalty.) EPA headquarters rejected our alternate approach as unsuitable and required us to meet the guidance directives on minimum numbers of SNC

and enforcement cases. As we already had our target of 35 facilities to review, we substituted 2 formal enforcement facilities (WAD980978803 and WAD980985048) for two secondary violators that had been in our original selection.

File Selection Table

Name	Program ID	City	State District	State	Zip	Evaluation	Violation	SNC	Informal Action	Formal Action	Penalty	Universe
CASCADE ANALYTICAL INC	WAD988470373	WENATCHEE	CRO	WA	98801	1	4	0	0	0	0	SQG
DUNKIN & BUSH INC RICHLAND	WAH000030380	RICHLAND	CRO	WA	99354	1	9	0	1	0	0	OTH
SHIELDS BAG & PRINTING CO	WAD009255647	YAKIMA	CRO	WA	98902	1	2	0	1	0	0	LQG
WILBUR ELLIS CO YAKIMA	WAD063350516	YAKIMA	CRO	WA	98903	1	0	0	0	0	0	OTH
HOME DEPOT 4714	WAH000012682	SPOKANE	ERO	WA	99212	1	6	0	1	0	0	SQG
INLAND EMPIRE DISTRIBUTION SYSTEMS INC	WAD988511499	PASCO	ERO	WA	99310	1	0	0	0	0	0	OTH
NOVATION INC	WAD988493722	SPOKANE	ERO	WA	99206	1	2	0	2	0	0	LQG
S&S ADVANCED METAL TECHNOLOGIES LLC	WAH000037303	SPOKANE	ERO	WA	99202	1	10	0	1	0	0	OTH
WA WSU SPOKANE RIVERPOINT CAMPUS	WAH000010553	SPOKANE	ERO	WA	99202	1	9	0	0	0	0	SQG
CHINOOK VENTURES INC.	WAD057068561	LONGVIEW	INDUSTRIAL	WA	98632	0	0	0	0	1	0	OTH
CONOCOPHILLIPS CO FERNDALE REFINERY	WAD009250366	FERNDALE	INDUSTRIAL	WA	98248	1	0	0	0	0	0	TSD(LDF)
GRAYS HARBOR PAPER LP	WAD050179605	HOQUIAM	INDUSTRIAL	WA	98550	1	0	0	0	0	0	CES
NIPPON PAPER INDUSTRIES USA CO LTD	WAD009270976	PORT ANGELES	INDUSTRIAL	WA	98362	0	0	0	1	0	0	CES
SHELL OPUS PUGET SOUND REFINERY	WAD009276197	ANACORTES	INDUSTRIAL	WA	98221	1	1	0	1	0	0	TSD(LDF)
US DEPT OF ENERGY HANFORD FACILITY	WA7890008967	RICHLAND	NUCLEAR	WA	99352	5	1	0	1	0	0	TSD(LDF)
BOWEN SCARFF FORD INC	WAD027333541	KENT	NWRO	WA	98032	1	10	0	1	0	0	CES
CROWLEY MARINE SERVICES PIER 17	WAD008034191	SEATTLE	NWRO	WA	98134	1	11	0	1	0	0	SQG
FOSTERS SVC CORP	WAD982654576	SEATTLE	NWRO	WA	98108	1	0	0	0	0	0	OTH
GKN AEROSPACE CHEM TRONICS INC	WAD980988018	KENT	NWRO	WA	98032	1	0	0	0	0	0	SQG
HISTORIC RECLAMATION	WAH000011387	SEATTLE	NWRO	WA	98107	0	0	1	0	1	45,200	LQG
LAITALA PAINTING CO INC	WAD980985048	WOODINVILLE	NWRO	WA	98072	1	0	0	0	1	10,000	OTH
MARINE FLUID SYSTEMS INC	WAD988490892	SEATTLE	NWRO	WA	98107	1	9	0	1	0	0	CES
SEATTLE PORT SEATAC INTL AIRPORT	WAD980980106	SEATTLE	NWRO	WA	98158	1	3	0	0	0	0	LQG
UNIVAR USA INC KENT	WAD067548966	KENT	NWRO	WA	98032	1	0	0	0	0	0	TSD(TSF)
US NAVY PSNS & IMF	WA2170023418	BREMERTON	NWRO	WA	98314	4	6	0	2	0	0	TSD(TSF)
AQUATIC CO	WAD980978803	YELM	SWRO	WA	98597	1	9	1	1	1	5,300	LQG
CROWN PLATING INC	WA0000905000	VANCOUVER	SWRO	WA	98661	1	0	0	0	0	0	CES
EMERALD SERVICES INC ALEXANDER AVE	WAD981769110	TACOMA	SWRO	WA	98421	1	0	0	1	0	0	TSD(TSF)
JOHNSON MILLWORK INC	WAD094633591	TACOMA	SWRO	WA	98409	1	10	0	1	0	0	SQG
KEMIRA WATER	WAD044110633	LONGVIEW	SWRO	WA	98632	1	2	0	0	0	0	SQG
PETROLEUM RECLAIMING SERVICE INC	WAD980511729	TACOMA	SWRO	WA	98421	1	2	0	2	0	0	TSD(TSF)

PROFESSIONAL COATINGS	WAD009253089	TACOMA	SWRO	WA	98421	1	7	1	1	1	6,400	LQG
SW WASHINGTON MEDICAL CENTER	WAD050967926	VANCOUVER	SWRO	WA	98664	0	0	1	0	1	13,340	SQG
WAL MART 2249	WAR000002147	CHEHALIS	SWRO	WA	98532	1	0	0	0	0	0	SQG
WESTPORT SHIPYARD INC PORT ANGELES	WAH000021989	PORT ANGELES	SWRO	WA	98363	1	7	0	1	0	0	LQG

Appendix D: Status of Past SRF Recommendations

During the Round 1 SRF review of Washington's compliance and enforcement programs, EPA Region 10 recommended actions to address issues found during the review. The following table contains all completed and outstanding recommendations for Round 1. The status categories in this table are current as of December 3, 2012.

For a complete and up-to-date list of recommendations from Rounds 1 and 2, visit the SRF website.

State	Status	Due Date	Media	E#	Element	Finding	Explanation	Completion Verification
WA - Round 1 Total: C0	Completed	5/31/2008 9:00:00 PM	RCRA	E2	Violations ID'ed Appropriately	EPA found that a different inspection type was more appropriate than the one reported (e.g., something other than a CEI was conducted but reported as CEI). Also, it is important to document a full CEI accomplished over a series of inspections at a large mega-facility (e.g. Hanford).	Ecology's Compliance Network will review the various inspections types available and discuss them with field staff by June 2008	EPA participated in Compliance Network meetings where the issue was discussed. Ecology managers confirmed to EPA that they had discussed the issue with their staffs.
WA - Round 1 Total: C0	Completed	2/29/2008 9:00:00 PM	RCRA	E4	SNC Accuracy	Ecology is appropriately identifying and classifying secondary violators and significant non-compliers.SNCs were typically reported at the same time as the formal enforcement action addressing it, rather than at the time the SNC was determined	Ecology should complete its evaluation concerning timeliness of SNC reporting and report the results to Region 10 by March 2008	Ecology agreed to change its process so that most SNC determinations will be made and entered into RCRAinfo on the official day 0 of the process.
WA - Round 1 Total: C0	Completed	6/29/2008	CAA, CWA, RCRA	E6 , E7 , E8	Timely & Appropriate Actions, Penalty Calculations, Penalties Collected	Ecology is not consistently applying economic benefit to it's penalty calculations, though they have made much progress since our 2005 PPA agreement.	Ecology and EPA Region 10 discuss the recommendations for economic benefit (June 2008) and agree upon next steps (e.g., evaluation, information sharing, etc.) including a timeline for action. Recommendations include affirming a Statewide policy for routine economic benefit recovery and/or conducting an evaluation of successful approaches to econ. benefit.	Meeting was held on June 4, 2008 between EPA and Ecology managers.

WA - Round 1 Total: C0	Completed	8/31/2008	RCRA	E8	Penalties Collected	File documentation can be improved with respect to penalty action decision-making.	Ecology should develop a standard process for documenting penalty calculations. This process should include justification for use of mitigating factors, amount that penalties are mitigated up or down, and documentation of consideration of economic benefit of noncompliance. SRF Milestone(s): Ecology will improve and clarify the documentation of penalty calculations, including any updating of the Inspector Guidance Manual as appropriate (with EPA assistance).	Ecology revised their procedures for documenting and calculating penalties. The revision was placed in the State's inspector manual for RCRA inspectors.
WA - Round 1 Total: C0	Completed	3/31/2008 9:00:00 PM	RCRA	E11	Data Accurate	A list of specific discrepancies noted was provided to Ecology so appropriate RCRAInfo corrections could be made. There was inconsistent information reported in RCRAInfo with respect to penalties – proposed, final, and collected. Ecology and EPA should ensure a common understanding of the national reporting expectations concerning penalty information and ensure consistent practices within Ecology, including how using enforcement action codes 310 and 311 actions codes (penalties/orders).	By April 2008, Ecology and EPA will discuss and clarify national reporting expectations concerning penalties, including any corresponding changes to Ecology's practices. At that time, they will determine whether any updates to the RCRAInfo data agreement are necessary and if so, by when.	The State has agreed to make changes in the data entry process to assure consistency.
WA - Round 1 Total: C0	Completed	7/31/2011	CWA	E1	Insp Universe	Washington committed to inspect all major sources each year. The Clean Water Act National Pollutant Discharge Elimination System Inspection Frequency Guidance for the Core Program and Wet Weather Sources allows for a 2:1 tradeoff of minor to major inspections. Because Ecology's PPA and MOA with EPA does not include the 2:1 ratio tradeoff, Ecology technically did not meet their inspection target. However, because of the guidance, we allowed the tradeoff criteria. SRF Milestone(s): Ecology has agreed to include this in the next PPA negotiation. (June 08)	EPA recommends Ecology incorporate the 2:1 tradeoff in the next round of PPA negotiations. New PPA is currently being negotiated (Feb. 2009), will go out for public review in May, 2009, and should be finalized in June, 2009.	This was negotiated in the last round of the EPA/Sate of Washington PPA

WA - Round I Total: C0	Completed	7/31/2010	CWA	E2 , E3	Violations ID'ed Appropriately, Violations ID'ed Timely	The major problem in the inspection reports was the failure to include a peer review. Nineteen of the 23 inspection reports did not document any violations.	Ecology should ensure a peer review is conducted for each inspection report. Ecology has agreed to evaluating their current process to ensure reviews are conducted. Ecology will inform EPA of the results of this evaluation in the PPA discussions in June 08 and implement any changes by 9/30/08.	The requirement is in the new PPA that was finalized in June of 2011
WA - Round I Total: C0	Working	5/31/2013	CWA	E4 , E10, E11, E12	SNC Accuracy, Data Timely, Data Accurate, Data Complete	In August 2004, EPA stopped entering Washington data into PCS. Ecology began uploading data from its WPLCS into PCS on January 6, 2006. This upload included historical data. However, several problems developed after the linkup, and both EPA and Ecology are currently working on this issue. In addition, Ecology does not enter the following data into PCS: 1) Inspections; 2) Inspection Audits; 3) Compliance Schedules, which means that Washington will not have any CS violations; 4) Enforcement Actions; 5) Single Event Violations; and 6) Pretreatment Performance Summary. Both Ecology and EPA Region 10 were relying on the PCS linkup to automatically calculate SNC. Due to this lack of data and the problems with the link up between WPLCS and PCS, SNC is not calculated. Ecology has Stated that calculating SNCs outside of PCS is unnecessary, as they address every violation regardless of SNC status. The next WA SRF review for NPDES should examine this issue more closely. Ecology staff have indicated they would rather focus on ensuring WPLCS has a complete, accurate and direct linkup to ICIS-NPDES, than spend resources to correct the linkup to PCS. Currently WPLCS needs to link to PCS then upload to ICIS-NPDES. It is important to note that PCS does not currently have a regular upload to ICIS-NPDES.	Ecology and Region 10 need to talk to EPA headquarters about its work to linkup PCS and associated options. Ecology also needs to seek funding, whether federal or State, to ensure the continued linkup to ICIS-NPDES. Ecology and Region 10 need to work out the continuing SNC issue, as well as plans and schedule for Ecology to report inspection and enforcement information.SRF milestone(s): Ecology and EPA (R10, OECA, and Office of Water) begin discussing data needs and options by June 30, 2008, as part of the PPA work plan development.	

WA - Round 1 Total: C0	Completed	9/29/2011	CWA	E6	Timely & Appropriate Actions	Ecology issues informal or formal enforcement actions for every violation of the permit that is found. Because every violation is addressed, Ecology States that they begin the enforcement process prior to SNC status. Ecology issued 688 informal enforcement actions in FY05. It is possible that every violation is addressed. However, due to the limited scope of this review, it was not possible for Region 10 to evaluate if each informal action brought the facility back into compliance. Similarly, without the linkup to PCS there is no way for Region 10 to verify that no facility reaches SNC.	Ecology should analyze the informal actions to see if any of the facilities rise to SNC status by September 2008 and share this information with EPA.	This was addressed in the 2011 PPA
WA - Round 1 Total: C0	Completed	7/29/2008	CAA	E1	Insp Universe	With the exception of one agency, the Washington local air and State agencies are substantially meeting the CMS frequencies. BCAA is the smallest of the agencies, responsible for two major sources in a largely rural area; the agency was faced with substantial staff turnover during the period of the review. They have recently hired new staff with responsibility to focus on stationary source compliance and enforcement.	In general, the Region recommends that Title V self-certifications be reviewed in a timely manner in order to complete and accurately report an FCE. BCAA should submit to EPA Region 10 by July 1, 2008, its plan for ensuring coverage of the minimum CMS compliance monitoring work.	email confirmation of CMS plan
WA - Round 1 Total: C0	Completed	6/30/2008	CAA	E2	Violations ID'ed Appropriately	Based on the files reviewed and discussions with staff, the air agencies have systems in place and are generally evaluating compliance with applicable requirements (on-site observations, reviews of CEM data, source test results, deviation reports, certifications). However, the files do not consistently contain a single document that concisely describes the scope and findings of each FCE. Agencies reviewed have active source test review and observations' programs and are also actively managing and tracking receipt and review of T5 compliance certifications. Even though several Washington State agencies complete FCEs annually rather than biannually, the quality of the FCEs is consistently excellent.	ORCAA, IND, NWCAA, PSCAA, BCAA should review examples of FCE documentation from other agencies (e.g., SCAPCA, SWCAA, CRO) in light of CMS (and the Compliance Assurance Agreement) and evaluate opportunities to improve their FCE documentation. Agencies are asked to inform EPA of results of their evaluations by July 1, 2008. Agencies should notify inspectors of the need to address identified improvements. At a minimum, PSCAA is encouraged to include a copy of the off-site tracking report in the file to supplement the on-site inspection report. If on-site compliance evaluation reports do not discuss all elements required to document an FCE, the reports should, at a minimum, reference where else in the files such information can be obtained.	last letter received 7/1/08

WA - Round 1 Total: C0	Completed	6/30/2008	CAA	E4	SNC Accuracy	HPV violations are not being appropriately identified and reported by all agencies.	Ecology should determine why HPVs are not being identified and reported and inform EPA of the results of that determination by July 1, 2008. Ecology is encouraged to look at what is working well in CRO to identify possible good practices to incorporate.By July 1, 2008, ORCAA should review their practices in light of the specific situations identified during the review and discuss with EPA R10 the factors that went into not flagging those violations as HPV.Agencies who did not report HPVs in this review cycle should review their procedures and consult with EPA (if necessary) on whether their procedures are sufficient to identify HPVs appropriately and to document that decision. If the determination is that the procedures are not sufficient, the agency will develop a plan to correct these procedures by July 1, 2008.EPA will provide HPV training on an as-needed basis to all Agencies in Washington. The training will include not only how to make the determination, but also the proper documentation.	ORCAA and Ecology responses submitted prior to 6/30/08
WA - Round 1 Total: C0	Completed	6/30/2008	CAA	E6	Timely & Appropriate Actions	While HPVs reviewed in most agencies were addressed with formal enforcement, not all offices are appropriately addressing HPVs. Generally, it seems that many actions in most jurisdictions are penalty only, whereas some cases could have benefited from corrective action in addition to penalty.	Ecology should determine why HPVs are not being addressed with formal enforcement, and inform EPA of results of determination by July 1, 2008. Ecology is encouraged to look at what is working well in CRO (as well as local agencies) to identify possible good practices to incorporate. In addition, EPA encourages the remaining agencies to review their enforcement process for whether in addition to penalty, requiring other actions may be appropriate to ensure future compliance, such as increased monitoring frequency, extra reports, or even O&M plan creation. These should especially be considered in examples of repeat violations.	Letter from Ecology

WA - Round 1 Total: C0	Completed	6/30/2008	CAA	E7 , E8	Penalty Calculations, Penalties Collected	While we have seen improvement in the Washington programs since our air review in 2003, case specific concerns were identified as noted in the five (5) cases including the specifics of how Economic benefit is assessed. We also believe changes in practices should be implemented. (1)	For the five (5) specific case matters in the report, , PSCAA, NWCAA, ORCAA local air agencies and PTP-IN (Ecology) are asked to discuss the situations with EPA to address any outstanding questions or determine if additional guidance should be provided. (2) General Practice and Policy Statements: For HPVs, we recommend the agencies not limit developing estimates of economic benefit to situations where the qualitative decision is yes, but to develop estimates unless documented in the file why economic benefit wouldn't accrue (e.g., paperwork violations). Where not in place, agencies should make a definitive policy Statement that economic benefit should be recovered in civil penalties as a matter of practice prior to July 1, 2008.(3) Documentation: Agencies are asked to submit to EPA copies of the economic benefit evaluation for penalties associated with HPVs through the 2008 calendar year.	Last of all letters received on 7/1/08. ORCAA letter 10/31/07, Ecology letter 6/28/08, NWCAA letter 7/1/08 and PSCAA letter 10/30/07.

Appendix E: Program Overview

Agency Structure

The RCRA Hazardous Waste and CWA NPDES programs are implemented by Washington State Department of Ecology (Ecology). CAA programs are implemented by Ecology and seven (7) local air agencies.

Ecology's compliance assurance program is largely implemented through three Environmental Programs (Air Quality, Water Quality and Hazardous Waste and Toxics Reduction Program) by staff located in regional offices. Two other Ecology Environmental Programs have compliance program responsibilities for specific categories of sources. The Industrial Section of the Waste 2 Resources (W2R) Program is responsible for multi-media permitting and compliance for certain large industrial sources (e.g., pulp mills, refineries, aluminum smelters). The Waste Management and the Tri-Party Agreement Sections of the Nuclear Waste Program are responsible for multi-media permitting, compliance and clean-up program work related to the U.S. DOE Hanford facility and other nuclear and mixed waste facilities. The four Ecology regional offices are located in Bellevue (Northwest), Lacey (Southwest), Yakima (Central) and Spokane (Eastern). The Industrial Section is located in Lacey and the Waste Management Section is located in Richland. A copy of Ecology's organizational chart is included at the end of this appendix.

The local air agencies were authorized by the 1968 Clean Air Washington Act. Most of the agencies have been in operation since shortly after passage of the Act. They are responsible for enforcing federal, State, and local air pollution standards within their jurisdictions. Each operates under a Board of Directors and Agency Director. Ecology does not exercise oversight over local agency compliance and enforcement programs. Agencies adopt SIPs and obtain program approvals or delegation from EPA to implement federal programs.

The Puget Sound Clean Air Agency, the largest of the LAAs, is organized into three divisions: Compliance & Legal; Air Quality Programs; and Finance, Technology, & Organizational Development. A copy of the PSCAA organizational chart is included at the end of this appendix.

Compliance and Enforcement Program Structure, Roles, and Responsibilities

Ecology:

Program Section managers located in the regional offices generally manage both permitting and compliance programs; they report to the respective Environmental Program Manager in Ecology's headquarters' office in Lacey. The Regional Program Sections, the Industrial Section and the Waste Management Section are responsible for implementing the respective media compliance assurance programs including assistance, compliance monitoring, informal and formal enforcement. Ecology relies on an Enforcement Workgroup and use of the Agency's Compliance Assurance Manual to coordinate among the programs and regions with respect to enforcement matters.

Ecology's Compliance Assurance Manual provides Ecology's enforcement principles and procedures for informal and formal enforcement. The Manual includes general and program-specific guidelines and program specific civil penalty calculation and documentation guidelines. It provides information on the AG's role and appeals to the Pollution Control Hearings Board, preparation of a Referral for Enforcement (RFE), consideration of gravity and economic benefit in penalty assessments and guidelines for settlement, penalty collection, and publicizing enforcement actions. Penalty actions are tracked in a State-wide enforcement database. The Enforcement Workgroup collects information and prepares the annual enforcement report. Section Managers have authority to issue administrative penalty actions up to a certain dollar amount (e.g., $20,000-$25,000); larger penalty actions are issued by the respective Program Managers.

LAAs:

Although they take different forms, the local air agencies also have written policies which outline the procedures for FCEs, enforcement actions, etc. Most of the local agency enforcement actions are administrative, though they do occasionally pursue judicial actions.

Program-Specific

NPDES

Ecology's NPDES program is organized within the Water Quality Division and operates through the Headquarters office in Lacey, the multi-media Industrial Section, the four regional offices, and several affiliated field offices (1 in Southwest, 1 in Northwest, 1 in Central, 1 in Bellingham, and 1 in Eastern). The multi-media and regional offices are responsible for issuing individual permits, responding to complaints, providing compliance/technical assistance, planning and conducting inspections, documenting inspections, determining violations, classifying violations and determining the appropriate enforcement responses. They also issue the informal enforcement actions (e.g., letters and phone calls) and formal enforcement referrals (e.g., notices of noncompliance orders, agreements, and penalty assessments).

For the water programs, there are cross-office management team and staff groups to help coordinate and ensure consistency among the implementing organizations. For example, the section managers have weekly meetings and periodic day-long meetings. Also, several staff workgroups focus on specific functions or sectors.

Air

State of Washington CAA stationary source compliance is implemented by Ecology and seven Local Air Agencies (LAAs). Ecology's program is carried out through two of its four regional offices (Eastern and Central), plus the multi-media Industrial Section and the Nuclear Waste Program for the Hanford site, as described above under "Agency Structure." Ecology's Northwest and Southwest Regional Offices do not implement CAA programs.

Ecology offices together regulate 21% of the major sources in the State (ranging from 8% in Industrial to less than 1% in Nuclear Waste). The rest of the CAA major sources in Washington are regulated through LAAs. The LAAs are Puget Sound Clean Air Agency, Northwest Clean Air Agency, Olympic Region Clean Air Agency, Southwest Clean Air Agency, Spokane Regional Clean Air Agency, Yakima Regional Clean Air Agency, and Benton Clean Air Agency.

Along with the Ecology Air Quality Program Manager, the Directors of the LAAs work collaboratively on the full range of air quality matters in the State through the Washington Air Quality Managers group (WAQM). This group is comprised of the director level of the LAAs and regional managers from Ecology. Compliance and enforcement matters are only one of the group's focus areas. The group meets monthly to discuss issues ranging from rule-makings to voluntary programs. The Air Quality Compliance Forum and the Permit Engineers Forum provide avenues for staff level discussions among all the agencies responsible for delivery of the clean air program in Washington.

The primary mechanisms within the State of Washington for cross-agency discussion of CAA Title V compliance and enforcement issues are the high priority violator (HPV) calls with EPA and the annual collaborative planning meeting with EPA.

PSCAA:

PSCAA regulates more than 27% of the major sources and more than 47% of the synthetic minor sources in the State. The staff members in the Compliance & Legal Division have the primary responsibility to implement the air quality regulatory programs for stationary sources in this jurisdiction. Key support is also provided by the Technology Department, as they develop and maintain the programs the agency uses to document the work completed and format that information for submittal to EPA's AFS database.

The engineers and inspectors of the Compliance & Legal Division are each assigned specific sources for which they are responsible over the course of the year. These responsibilities include the permitting, inspections, review of all source-submitted compliance reports, and any needed enforcement actions. In addition to the operating permit and SM80 source assignments, the same compliance staff members fulfill other responsibilities for a wide range of sources. The main components of the Compliance Division work fall under four program elements: Asbestos, Notice of Construction (minor new source review program), Registration, and Operating Permits. Work associated with delegated federal rules (NSPS/NESHAPS) for sources that are not operating permit sites is administered through the Registration program. The inspectors also respond to air quality related complaints, coordinate responses with others for illegal outdoor burning, and support agency objectives related to air quality related burn bans.

All of the work is documented in the appropriate program of the agency compliance database. The required compliance activities are uploaded to EPA's AFS database monthly through the use of the Universal Interface tool.

RCRA

The RCRA compliance assurance program is organized within the Hazardous Waste and Toxics Reduction Program (HWTR). Inspection, enforcement, and technical assistance work is largely carried out by staff and managers located in the four regional offices. The Industrial Section in the W2R Program has multi-media inspection and enforcement staff who focus on facilities in certain industries (e.g., refineries, aluminum, pulp and paper, and captive facilities for these industries). Multi-media compliance and enforcement work (including RCRA) for the U.S. DOE Hanford facility is carried out by the Compliance Section in the Nuclear Waste Program.

The Compliance Network is made up of HWTR compliance unit managers and team leads from all of the regional offices, Nuclear Waste Program, Industrial Section, managers for the Policy and Permitting Unit and the Information Management Unit at headquarters, and a representative from EPA. To help coordinate offices and ensure consistency, this group meets monthly to discuss rule interpretations, compliance related program policies, and other compliance issues. They then make recommendations to the Program Management Team (HWTR program manager and section managers) which makes final decisions on the issues. The EPA RCRA unit managers and the Ecology HWTR Section Managers (including representation from Industrial Section and Nuclear Waste) meet quarterly to discuss a wide range of topics including RCRA compliance issues.

The most significant portion of the Federal Hazardous Waste regulations for which Ecology did not seek authorization is the portion for burning of hazardous waste in boilers and industrial furnaces, the Boiler and Furnace Rule. Although EPA retains authority for this portion of the Hazardous Waste program in Washington, there are no longer any boilers or industrial furnaces subject to this rule in the State.

Other Entities

The Washington Department of Agriculture is responsible for administering and managing the compliance and enforcement aspects of the NPDES Animal Feeding Operations (AFO) through separate Memoranda of Agreement with Ecology and EPA. Ecology retains authority to issue NPDES permits for AFOs.

The Attorney General's Office (AG) is actively engaged in Ecology administrative (civil) enforcement. Where cases are appealed, the AG is the primary point of contact between the parties.

The Pollution Control Hearings Board (PCHB) is an independent, quasi-judicial State agency created by the Washington legislature which is entirely separate from any other State, regional, or local unit of government. Its function is to hear and act on appeals to orders or decisions (including enforcement orders or penalty assessments) made by Ecology or the LAAs.

Local Agencies Included and Excluded From Review

In Washington, there are seven LAAs. Due to resource constraints, EPA-R10 was only able to review two LAAs in addition to Ecology. PSCAA and SWCAA were chosen for review because of their location and the large proportion of Washington facilities regulated by these two LAAs. Together these two LAAs regulate 38% of major facilities and 59% of synthetic minor facilities (Tier 1) in Washington. Based on data in OTIS, this SRF review included the agency offices where 75% of all CAA compliance and enforcement activities were reported for FFY2011. The following table provides the proportions (according to OTIS) regulated by the various Ecology offices and the seven LAAs.

Organization	# of active majors, Metric 1a1 in OTIS	% of active majors universe	# of active synthetic minors (Tier 1), Metric 1a2 in OTIS	% of active synthetic minors universe
PSCAA	34	27.4%	77	47.2%
NWCAA	21	16.9%	10	6.1%
ORCAA	15	12.1%	11	6.7%
SWCAA	13	10.5%	19	11.7%
Ecology – Industrial	10	8.1%	0	0%
Ecology – Eastern RO	10	8.1%	17*	10.4%
SRCAA	9	7.3%	19	11.7%
Ecology – Central RO	5	4.0%	5	3.1%
YRCAA	4	3.2%	1	0.6%
BCAA	2	1.6%	4	2.5%
Ecology – Nuclear	1	0.8%	0	0%
	124	100%	163	100 %

* OTIS values were used for this table and were the basis of selecting offices to review. Ecology subsequently informed us this value was actually 14 in FY2011.

Because Ecology does not exercise oversight authority over how the LAAs carry out their compliance assurance programs, this SRF review assessed PSCAA and SWCAA separately from the Ecology assessment.

Resources, Staffing, and Training

NPDES

Resources

- There are a total of 238 FTEs in the Water Quality Program State-wide for Ecology. This includes 5 main categories, 1) Prevent Point Source Pollution, 56 FTEs; 2) Reduce Nonpoint Source Pollution, 25 FTEs; 3) Control Stormwater Pollution, 51 FTEs; 4) Provide Financial Assistance, 43 FTEs; and 5) Cleanup Polluted Waters, 33 FTEs.
- According to Ecology's Water Quality Program Plan from 2011 to 2013, there are 84.11 FTEs dedicated to NPDES permit implementation, 13.04 FTEs for NPDES permit

compliance and enforcement (including data management), and approximately 22.6 FTEs dedicated to administrative support and management.

- The Eastern Region has approximately 12.4 FTEs for permit implementation and compliance and enforcement, with 5 FTEs for administrative support and management.
- Northwest Region has approximately 23.05 FTEs for permit implementation and compliance and enforcement, with 5.3 FTEs for administrative support and management.
- Southwest Region has approximately 24.3 FTEs for permit implementation and compliance and enforcement, with 5.1 FTEs for administrative support and management.
- Bellingham Field Office has approximately 3.1 FTEs for Permit implementation and compliance and enforcement, with 0 FTE for administrative support and management.
- The Attorney General's Office in Washington has about 2.95 FTEs dedicated to State NPDES enforcement and permit implementation.

Resource Constraints

- Ecology has seen an overall decrease in the number of FTEs that are dedicated to the water quality program. From 2007 to 2009 there were 274 total FTEs, compared to the 238 total FTEs that were available from 2011 to 2013.
- According to Ecology, due to the resource downturn Ecology has had delays in their ability to issue new permits, which will create a backlog of permits in the future and an increase in the overall workload. This also means there are limited resources to respond to information requests, new initiatives, planning, or strategic thinking related to point sources and permits.

Staffing and Training

- Ecology has 110 FTEs currently working on NPDES-related projects. These FTEs are paid via Ecology's permit fee account. The program currently carries about 5 vacancies, which are expected to be filled by the end of the first quarter of 2013. Ecology estimates that it carries about 3-5 permit fee vacancies at any time due to staff turnover.
- Ecology's HR team works to ensure that qualified candidates meet the state requirements for each given job classification. As staff develop expertise and demonstrate improved skills and abilities, they can be upgraded or move into higher level positions. Ecology's Water Quality Program plans to discuss retention and succession planning ideas after launching a strategic planning team in January 2013.

Air

Ecology Resources

In 2011 Ecology had a total of 6.8 FTEs for compliance and enforcement employees working in the Title V program. Below is a breakdown of the Ecology Title V FTE by individual regions:

- Industrial Section 2.33
- Nuclear Waste 0.86
- Central Region 1.16
- Eastern Region 1.3
- Headquarters 1.15

Resource Constraints

In 2011, Ecology personnel were required to take 7.8 furlough days off work. The reduced work time has resulted in slower processing of permitting and enforcement actions.

PSCAA Resources

The Compliance & Legal Division staffing levels that work directly on the operating permit program and SM80 sources include 12 inspectors, 5 engineers, 1 compliance systems staff person, 5 administrative assistants, and a paralegal. Additionally, the division includes 2 inspection supervisors, a manager for engineering, a supervisor for the legal department (also an attorney that supports all agency legal needs) and the Director of Compliance & Legal. Other staff members in this division (see organization chart at the end of this Appendix) are working on other compliance programs separate from the EPA AFS source reporting.

RCRA

Resources

- The HWTR Program has 118 FTEs. This includes compliance, pollution prevention, program support (permitting, policy, and information management), and administration (supervisory and administrative support).
- The Industrial Section of the W2R program has 17 FTEs dedicated at least in part to RCRA issues. These inspectors, compliance staff, and toxics reduction specialists are responsible for air, water, RCRA, and hazardous waste cleanup compliance and permitting. Approximately 10-30% of staff time is spent on RCRA work. These numbers do not include supervisory, administrative, and data management staff who also perform RCRA work.
- The Nuclear Waste Program has 79 FTEs. These programs are responsible for multimedia permitting, compliance, and cleanup activities.
- In addition to program staff, Ecology is supported by the State Attorney General's Office. The HWTR has two attorneys assigned, who also provide support to the Nuclear Waste Program for RCRA related issues.
- Staffing levels are summarized in the following table.*

	Total RCRA related staff	Inspectors / compliance	Attorney	Corrective Action / Permitting	Toxics Reduction Specialists
CRO	10	3		1	2
ERO	9	4		0	2
HQ	47	1	2	3	3
Industrial#	17	9*	Assigned as needed	1*	1*
Nuclear	30	2	1	26	0
NWRO	29	12		5	7
SWRO	20	8		5	5
Total		29	3	15	19

* Values in this table are rounded to whole numbers and do not include management and administration, policy and planning, fiscal and data support, and additional toxics efforts such as safer chemicals, sustainability, environmental justice, etc., which are also part of Ecology's RCRA work.
# Approximately 10-30% of the Industrial Section staff's time is spent on RCRA work.

Resource Constraints

- With 13 Operating TSDs, almost 500 LQGs, and over 600 MQGS (Federal SQG), Ecology's HWTR inspectors are busy.
- A rules moratorium has caused some issues to be temporarily addressed with policy and guidance in lieu of regulation. No required RCRA rule adoptions have been delayed due to this moratorium.
- State budget issues have resulted in occasional hiring freezes and required reduction in work time equivalent to over seven days for each staff person within the program. The resulting reduced work time has resulted in reduced technical assistance to businesses and overall slower processing times for all staff work. According to Ecology, despite these reductions, fieldwork, in particular inspections, has been deemed the highest priority. Therefore the state PPA commitments have been met.

Staffing and Training

- The HWTR program currently has a 7% vacancy rate. Six of the nine vacant positions are compliance related: two are replacements for retired staff, two are filling positions recently emptied by promotions, and two are new positions. State budget constraints have caused hiring delays in the past, but Ecology is currently in the process of filling these vacancies.
- The state legislature has provided funding for four additional inspector FTEs with the announced goal of visiting all LQG and MQG sites every three years.
- Ecology has written employment policies and procedures to hire and maintain qualified staff. Ecology posts all position openings on an internal website or on a public website to recruit qualified candidates. Ecology has a code of professional conduct, communication and customer service credos, and an employee performance management system with annual performance evaluations.

Data Reporting Systems and Architecture

NPDES

In 2010 Ecology launched their new data system, Permit and Reporting Information System (PARIS), which replaced their older system, Water Quality Permit Life Cycle System (WPLCS) database, to store and track water quality permit and enforcement information. When the new system came on-line the State was no longer flowing data to PCS or ICIS-NPDES. With the development of a new database link, Ecology has transferred all of its data to ICIS-NPDES and began testing data flow from PARIS to ICIS-NPDES in early 2013. Data are now flowing smoothly from PARIS to ICIS-NPDES.

Air

Of the 11 air jurisdictions in Washington (seven LAAs and four Ecology Offices), eight directly enter data into AFS (often in addition to populating their own systems) and one agency uses the universal interface (UI) to report the minimum data requirements (MDRs) from that agency's data management system to AFS. For three LAAs, EPA Region 10 receives information from the agencies and enters their data into AFS.

RCRA

Ecology uses a translator to convert required "handler" data elements from the State's system to RCRAInfo. Ecology directly inputs compliance monitoring, enforcement, permitting, and corrective action information into the RCRAInfo database.

Major State Priorities and Accomplishments

NPDES

One of Ecology's top strategic priorities is to protect and restore Puget Sound. Ecology continues to provide compliance monitoring and assistance State-wide with a focus on key actions in the Puget Sound region. An area of significant activity has been stormwater. Ecology's work to effectively implement stormwater initiatives in Puget Sound involves a number of key strategies:

- Sustaining administration of multiple permits that require basic stormwater management responsibilities, focusing increasingly on improved performance and environmental outcomes.
- Completing watershed characterization and basin specific studies to develop an initial retrofit project list to help prioritize funding needs for legacy stormwater problems (voluntary program).
- Working with municipalities that operate treatment plants and have stormwater jurisdiction and land use decision making options to avoid expensive treatment plant upgrades by addressing nonpoint and stormwater (outreach).
- Implementing the Puget Sound Coordinated Stormwater Monitoring Program to inform stormwater management broadly and implementation of permits specifically (monitoring).
- Working with the Washington Stormwater Center and other stakeholders to provide low impact development (LID) training for local government and stormwater professionals (pollution prevention and outreach).

Other focal work includes:

- Ecology and EPA are managing a smooth IT and data transfer process from Ecology's PARIS system to ICIS-NPDES.
- Since approximately 2007 (including FY2011), Ecology tracks key permit metrics to ensure progress on permit timeliness, enforcement indicators, and discharge monitoring compliance rates (compliance monitoring and enforcement). Ecology continues to track key compliance and enforcement data including, but not limited to:
    - Percent of active water quality discharge permits (NPDES) that are up to date;
    - Discharge monitoring report compliance rates for Construction and Industrial stormwater permits;
    - Number of industrial and construction stormwater inspections per quarter;
    - Permit timeliness for those applying for construction stormwater permits; and
    - Percent of city and county phase II municipal stormwater permittees in substantial compliance with their permit.

Air

Ecology's Air Quality Program is updating its Strategic Plan during the summer of 2013. A copy of their revised Strategic Plan will be available in the fall of 2013.

RCRA

Priorities
Ecology's RCRA Compliance and Enforcement priorities focus on inspecting facilities with the most potential to cause environmental harm.

HWTR considers the following when selecting facilities for compliance inspections:

- EPA commitments
- Legislative directives
- Generator status
- Site compliance history
- Time since last inspection
- Sites with high risk processes
- State priorities for specific industries

HWTR enforcement priorities are described in the program compliance assurance policy as follows:

> The HWTR Program places a priority on addressing risks to human health and the environment. The HWTR Program expects that businesses and public agencies will operate in compliance with environmental regulations. Our approach to achieving compliance is to offer technical assistance and informal enforcement to help businesses understand and comply with environmental regulations. Because formal enforcement is resource intensive, this approach is preferred before using formal enforcement unless there is an imminent threat to human health or the environment, or repeated non-compliance with regulations deemed important enough to expend limited state resources.

The Industrial Section regulates a limited universe of facilities. As a result, site visits and inspections of the facilities are conducted on a regular basis. Priorities for the next couple of years are:

- Continue to provide technical assistance to industrial facilities,
- Focus on catching up on corrective action and permitting projects.

The Nuclear Waste Program prioritizes inspections similar to the HWTR Program.

Accomplishments:

1. Ecology is providing grant funding to 27 local government agencies to conduct multimedia site visits, naming the effort as the Local Source Control Program. The LSC program has conducted nearly 10,000 site visits, including 1,728 site visits during Federal Fiscal Year

2011. These visits have been mostly in the greater Puget Sound area and are primarily informational, but can result in referrals to Ecology in case of environmental threats.

2. Better targeting and process streamlining has led to a constant increase in compliance inspections for more than five years. The HWTR program alone has more than doubled the number of CEIs it conducts.

State Fiscal Year	CEIs
2007	162
2008	202
2009	244
2010	248
2011	298
2012	361

3. Ecology issued an enforcement order against Whitney Farms in Central Region regarding the disposal of waste fruit pomace. Although beneficial as a soil amendment, when disposed in large quantities pomace can self heat to several hundred degrees Fahrenheit. The cooled crust of discarded pomace appears similar to soil, and poses a threat to people and animals that unknowingly walk onto it and break through the crust, suffering severe burns. With EPA and the Benton County Health Department, all the known locations where Whitney Farms disposed of more than 10,000 cubic yards of this material have been remediated and made safe.

4. Ecology entered into an Agreed Order and Stipulation with Philip Services Corporation as a result of a $288,000 penalty in July 2009. The settlement consisted of bimonthly audits by a third party with stipulated penalties for repeat violations. This resulted in greatly improved compliance for the duration of the agreement, ending in November 2011. Ecology has seen reduced compliance since that time.

5. The 2010 Washington State legislature funded additional hazardous waste compliance inspectors. This has helped HWTR increase from approximately 250 CEIs in 2010 to over 350 in 2012. It is a program goal to inspect each LQG and MQG in the state at least once every three years. This goal was set based on an HWTR study that showed increasing environmental threats at generators when the frequency of inspections drops below once every three years. The HWTR data, showing rising environmental threats at Washington's generators, were key to gaining the support received from the State Legislators who approved the additional funds for inspectors.

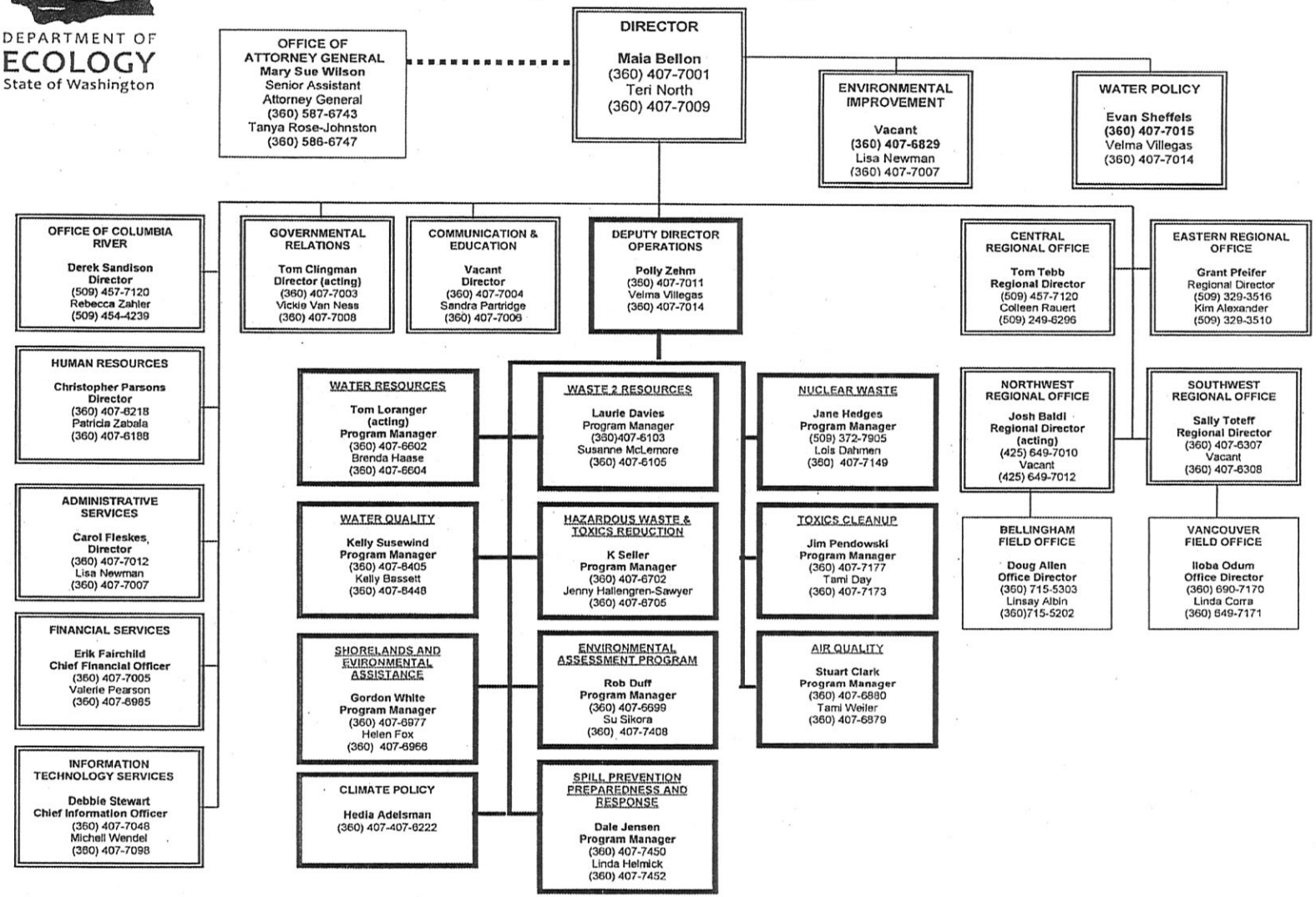
6. HWTR continues to measure the compliance rate among generators by tracking a subset of RCRA violations, which HWTR calls Compliance Indicator Violations (CIVs). HWTR has tracked these indicator violations for close to 20 years. In 2002, the percent chance of an inspector finding a CIV during a facility inspection was 27%. However, this rate was found to be rising and by 2010 there was a 65% chance that an inspector would find an environmental threat during a CEI inspection. With the additional inspectors funded by the legislature, HWTR has steadily increased its inspection counts. Over the last two years HWTR has seen a significant drop in the CIV rate. Washington's generators have 12% fewer

near-term threats to the environment than they did two years ago. This system of measuring the compliance rate at Washington generators has provided a clear picture, supported by data, of the state of RCRA compliance at regulated generators. HWTR has found that this system helps show the near-term threats to the environment from active generators.

7. The HWTR Program has completed several LEAN projects which have improved the quality, efficiency, and consistency of its compliance program across the State. Staff from EPA Region 10 participated and provided valuable support on these projects. HWTR has recently improved several guidance documents for inspectors, an on-line Inspectors Toolbox with guidance and links needed by inspectors, and an Inspectors Manual, which provides direction on all aspects of inspections and enforcement. The Compliance Network, a team of key compliance staff from across the State along with staff from Region 10, provides the communication framework that enables these program improvements to occur.

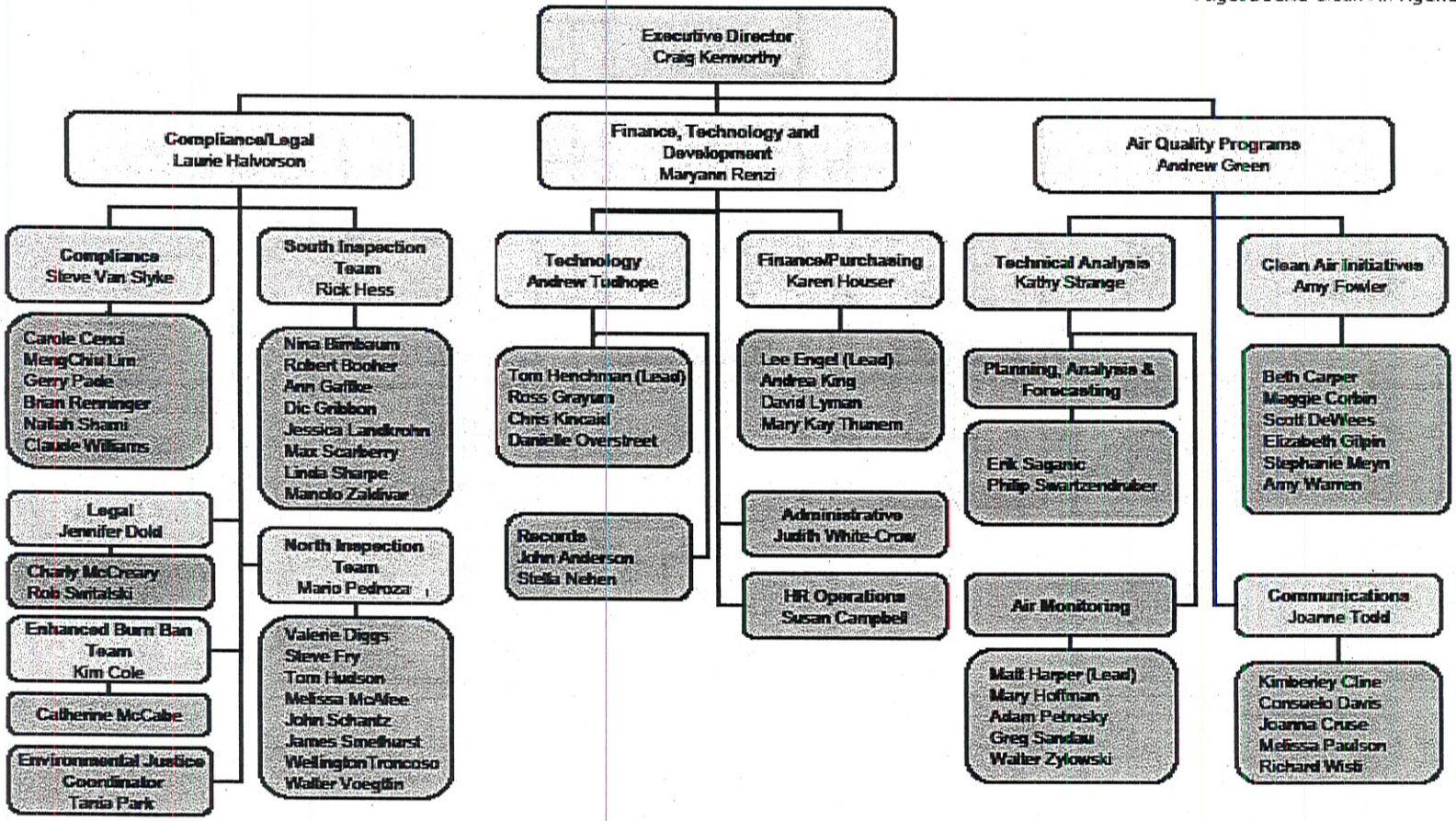
DEPARTMENT OF ECOLOGY
State of Washington

Washington State Department of Ecology



Clean Air Agency
Personnel Organization by Department

pscleanair.org
Puget Sound Clean Air Agency



Appendix F: SRF Correspondence

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10
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Seattle, Washington 98101-3140

OFFICE OF THE
REGIONAL ADMINISTRATOR

FEB 10 2012

Ted Sturdevant
Director
Washington Department of Ecology
P.O. Box 47600
Olympia, Washington 98504-7600

Dear Mr. ~~Sturdevant~~ Ted

The purpose of this letter is to formally kick off the U.S. Environmental Protection Agency's review of the Washington Department of Ecology's air, hazardous waste, and water compliance and enforcement programs under the State Review Framework. As you know, the SRF is a tool to evaluate performance in the Clean Air Act Stationary Sources, Clean Water Act National Pollutant Discharge Elimination System, and Resource Conservation and Recovery Act Subtitle C compliance and enforcement programs. The SRF was developed to promote consistent levels of activity in state and regional enforcement programs, consistent oversight of state and regional enforcement programs, and consistent levels of environmental protection across the country. For the SRF review this year, Ecology's compliance and enforcement programs will be evaluated using data from 2011.

In addition, beginning in FY2012 the EPA is changing how it conducts oversight reviews of permitting and enforcement programs under the state National Pollutant Discharge Elimination System. As part of the Clean Water Act Action Plan, the EPA is transitioning toward integrating the SRF review with the NPDES Permit Quality Review (PQR). This integrated approach is intended to obtain a comprehensive understanding of permitting and compliance elements of the NPDES program, and provide increased transparency through making PQR and SRF results publicly available on the EPA's website. Because the EPA is transitioning its process in FY2012, the EPA will utilize the January 2011 PQR Report for Washington rather than conducting a new PQR at this time.

In the near future, the EPA will be contacting managers and staff in Ecology programs for air, hazardous waste, and water regarding the review process and timeframes for various steps in the review. Final reports on Ecology's programs are expected to be completed no later than September 30, 2012. You and your staff will have opportunities to comment on draft findings and draft reports. Reports will be posted on publicly available websites. Recommendations and follow-up actions will be tracked in two national databases called the SRF Tracker and the Action Item database.

I look forward to learning the outcome of this upcoming review, and discussing ways the EPA can support Ecology in maintaining a robust compliance and enforcement program in air, waste, and water, as well as a robust NPDES permit program. Evaluating EPA and State performance and making this information readily available to the public are key priorities for the EPA.

I greatly appreciate the cooperation of your staff as we work through the SRF evaluation and any follow-up actions. Lauris Davies, Associate Director, Office of Compliance and Enforcement (OCE),

will be our primary management contact, and our key staff coordinator is Christine Kelly if your staff have questions. Lauris can be reached by phone at (206) 553-2857 or by e-mail at Davies.Lauris@epa.gov and Christine can be reached at (206) 553-0718 or Kelly.christine@epa.gov.

Sincerely,

Dennis J. McLerran
Regional Administrator

cc: Polly Zehm
Washington Department of Ecology

Kelly Susewind
Washington Department of Ecology

K Seiler
Washington Department of Ecology

Stuart Clark
Washington Department of Ecology

Kickoff Letters

In addition to the overall kickoff letter included above, program-specific kick-off letters were sent to the Executive Directors of the two LAAs and to Program Managers at Ecology. Letters were also sent to the five LAAs that were not selected for review. These letters in .pdf version are available upon request.

DMAs and File Selections

Emails with details are attached below.

From: Mike Slater/R10/USEPA/US
To: "Pearson, James D. (ECY)" <jpea461@ECY.WA.GOV>, ksei461@ecy.wa.gov,
Cc: CherylB Williams/R10/USEPA/US@EPA, Jack Boller@EPA, Kelly.Christine@EPA.GOV
Date: 05/17/2012 02:12 PM
Subject: State Review Framework (SRF) list of RCRA files for review along with Data Metrics Analysis

Hello Jim and K,
The list of files selected and the Data Metrics Analysis are attached for the your SRF 2011 RCRA compliance and enforcement program review. Please send the list to the respective regional offices to begin assembling the files for the review visits. Jack will be arranging regional office visits during June and July with the regional managers in an effort to minimize any inconvenience to Ecology staff.

The Data Metrics Analysis is derived from the verified data posted on the OTIS web site, http://www.epa-otis.gov/otis/srf/, which has been "frozen" for the SRF historical record. We used the draft Round 3 guidance for conducting the data review and this is subject to change based on the comments EPA may get on the guidance. The draft guidance identifies three categories that we used to assess the categories: Meets Requirements, State Attention, and State Improvement. The Data Metrics Analysis will be combined with the File Metrics Analysis into findings and recommendations in the SRF report.

Thank you for your assistance with the SRF 2011 RCRA program review. Please let me know what questions you have about the file selection and data metrics analysis.

thanks,
Mike Slater
EPA Oregon Office
503.326.5872

washington files selected otis revised 5_14.xlsx

OTIS Washington 2011 RCRA data metrics.xls

From: Robert Grandinetti/R10/USEPA/US
To: nkme461@ecy.wa.gov, GSTE461@ECY.WA.GOV,
Cc: KEMM461@ECY.WA.GOV
Date: 06/29/2012 10:56 AM
Subject: 2012 State Review Framework

Just an FYI this letter went out in the mail today. I will schedule file review times with each of the regions in the next couple of weeks. I plan to have them occur in August. Here is the letter and the State Review Framework metrics and the list of files to be reviewed.

WA SRF Data & File Review 6.29.12.pdf

2012 WA Metrics.xlsx

Washington File Selections Sent to State.xlsx

Rob Grandinetti
EPA Region 10
Office of Compliance and Enforcement
NPDES Compliance Unit
309 Bradley Boulevard, Suite 115
Richland, WA 99352
Phone: 509.376.3748
Fax: 509.376.2396

From: Rindy Ramos/R10/USEPA/US
To: rhib461@ECY.WA.GOV,
Date: 05/09/2012 12:18 PM
Subject: Data Metrics Analysis and File Review Selection

Rich,

I have gotten OECA's approval of the Data Metric Analysis and File Selection for Ecology. It will formally be sent out next week. Please share the following with the appropriate regional contacts.

The following file contains the 15 files I would like to review broken out by regional office. There are 5 for Industrial Section, 3 for CRO and 7 for ERO. I may want to rethink my current review schedule because CRO has less files than I originally had estimated and ERO has more.

Is Monday between 8 & 8:30 still okay with you and Kathy?

FILE REVIEW SELECTION LIST:

WDOE File Selection List.xlsx

COMBINED WDOE Data Analysis: (Industrial Section, CRO, ERO, & Hanford) Please note: these are initial finding based on the OTIS verified data and the findings may changed based on the file review.

Combined - WDOE - Data Analysis.xlsx

ERO DATA ANALYSIS

EROMDA.xlsx

CRO DATA ANALYSIS

CROMDA.xlsx

INDUSTRIAL SECTION DATA ANALYSIS

IndustrialMDA.xlsx

Call if you have any questions.

Lorinda (Rindy) Ramos
OCE-127 USEPA R10
Air/RCRA Enforcement Unit
1200 6th Avenue, Suite 900
Seattle, WA 98101
Phone: (206) 553-6510
Fax: (206) 553-0110
Ramos.Rindy@EPAMAIL.EPA.GOV

From:	Rindy Ramos/R10/USEPA/US
To:	stevev@pscleanair.org,
Cc:	rosemaryb@pscleanair.org, Christine Kelly/R10/USEPA/US@EPA
Date:	08/02/2012 04:45 PM
Subject:	SRF Initial Data Analysis and File Selection

Steve & Rosemary:

Attached is the Initial Data Metric Analysis (DMA) and a list of files I would like to review during the file review portion of the State Review Framework. Implementation of the new SRF guidance, procedures, and computer programming has taken a lot longer than anticipated.

Please look over the list of files and let me know if you think August 14 - August 17 is doable for the file review. As a reminder, FFY 11 is the year under review but depending on the activity we are reviewing (i.e. formal enforcement action) we may need to have access to documentation prior to FFY 11.

Also, please look over the DMA. The DMA is based on the data that underwent the data verification process. The 'findings' are initial findings/comments and are subject to change based on your input. At the time of the file review we can discuss any finding that is categorized as an area for state(local) attention or improvement.

Feel free to call if you have any questions.

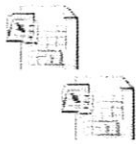
PSCAA - DMA - 4-27-12.xlsx

File Selection 8-2-12.xlsx

Lorinda (Rindy) Ramos
OCE-127 USEPA R10
Air/RCRA Enforcement Unit
1200 6th Avenue, Suite 900
Seattle, WA 98101
Phone: (206) 553-6510
Fax: (206) 553-0110
Ramos.Rindy@EPAMAIL.EPA.GOV

From: Rindy Ramos/R10/USEPA/US
To: randy@swcleanair.org, Koprowski.Paul@EPA.GOV,
Cc: Christine Kelly/R10/USEPA/US@EPA
Date: 08/14/2012 02:01 PM
Subject: Data Metric Analysis and File Selection

I got the go ahead from OECA on the DMA and the File Selection. Feel free to call if you have any questions.



SWCAA DMA - 8-9-12.xlsx

SWCAA File Selection 8-9-12.xlsx

Lorinda (Rindy) Ramos
OCE-127 USEPA R10
Air/RCRA Enforcement Unit
1200 6th Avenue, Suite 900
Seattle, WA 98101
Phone: (206) 553-6510
Fax: (206) 553-0110
Ramos.Rindy@EPAMAIL.EPA.GOV

Draft Report Transmittal Letters

A copy of the letter transmitting the Draft Report to Ecology is included below. Similar letters were sent to the Executive Directors of PSCAA and SWCAA. The latter letters in .pdf version are available upon request.

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10
1200 Sixth Avenue, Suite 900
Seattle, Washington 98101-3140

APR 30 2013

OFFICE OF
COMPLIANCE AND ENFORCEMENT

Ms. Maia Bellon
Director
Washington Department of Ecology
P.O. Box 47600
Olympia, Washington 98504-7600

Dear Ms. Bellon:

The purpose of this letter is to transmit the draft report of the U.S. Environmental Protection Agency's (EPA's) review of the Washington Department of Ecology's (Ecology's) air, hazardous waste, and water compliance and enforcement programs under the State Review Framework (SRF). In addition to evaluating Ecology's programs, this SRF review also evaluated the air programs for two of Washington's local air agencies, Puget Sound Clean Air Agency and Southwest Clean Air Agency.

As you may know, the SRF is a tool to evaluate performance in the Clean Air Act (CAA) Stationary Source, Clean Water Act (CWA) National Pollutant Discharge Elimination System, and Resource Conservation and Recovery Act (RCRA) Subtitle C compliance and enforcement programs. The SRF was developed to promote consistent levels of activity in state and regional enforcement programs, consistent oversight of state and regional enforcement programs, and consistent levels of environmental protection across the country. For the SRF review summarized in this draft report, Ecology's compliance and enforcement programs were evaluated using data from 2011.

Beginning in FY2012 the EPA started changing how it conducts oversight reviews of permitting and enforcement programs under the National Pollutant Discharge Elimination System (NPDES). As part of the Clean Water Act Action Plan, the EPA is transitioning toward integrating the SRF review with the NPDES Permit Quality Review (PQR). This integrated approach is intended to obtain a comprehensive understanding of permitting and compliance elements of the NPDES program and provide increased transparency through making PQR and SRF results publicly available on the EPA's website. Because the EPA was transitioning its process in FY2012, the EPA utilized the January 2011 PQR Report for Washington rather than conducting a new PQR in 2012. The enclosed draft report provides extensive excerpts from the 2011 PQR Report.

EPA program managers will soon be contacting managers in Ecology programs for air, hazardous waste, and water regarding the findings in the draft report. Per EPA's SRF Guidance, you and your staff will have a 45-day review period to comment on draft findings and the overall draft report. In addition to commenting on the individual program Elements, Findings, and Recommendations, Ecology programs might want to review Appendix E to ensure the overview of Ecology's programs provides adequate information.

The final report on Ecology's programs is expected to be completed no later than September 30, 2013. Reports will be posted on publicly available websites. Recommendations and follow-up actions will be tracked in two national databases called the SRF Tracker and the Action Item database.

I look forward to discussing ways the EPA can support Ecology in maintaining robust compliance and enforcement programs in air, hazardous waste, and water. Evaluating EPA and State performance and making this information readily available to the public are key priorities for the EPA.

I greatly appreciate the cooperation of your staff who assisted in this SRF review. Their assistance was invaluable. Lauris Davies, Associate Director, Office of Compliance and Enforcement (OCE), is our primary management contact for SRF, and our key staff coordinator is Christine Kelly if your staff have questions. Lauris can be reached by phone at (206) 553-2857 or by e-mail at Davies.Lauris@epa.gov, and Christine's contact information is (206) 553-0718 and Kelly.Christine@epa.gov.

Sincerely,

Edward J. Kowalski
Director

cc by email: Polly Zehm
Washington Department of Ecology

Kelly Susewind
Washington Department of Ecology

K Seiler
Washington Department of Ecology

Stuart Clark
Washington Department of Ecology

Appendix G: Response Letter from Ecology

STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY
PO Box 47600 • Olympia, WA 98504-7600 • 360-407-6000
711 for Washington Relay Service • Persons with a speech disability can call 877-833-6341

June 14, 2013

Edward J. Kowalski
Director
US EPA, Region 10
1200 Sixth Ave, Suite 900
Seattle, WA 98101-3140

Dear Mr. Kowalski:

Thank you for your letter dated April 30, 2013, regarding the U.S. Environmental Protection Agency's (EPA's) State Review Framework (SRF) Draft Report of the Washington State Department of Ecology (Ecology). We are submitting comments to the draft findings and overall draft report pursuant to EPA's SRF Guidance. Our comments are noted under "state response" and in Appendix E of the attached report, highlighted in red.

With diminished federal grants and state level budget cuts, EPA should work with us to streamline the SRF process and focus on the most critical elements that ensure environmental protection.

Washington should be held to national reporting standards or timeliness measures under this audit, not state targets or performance measures that might be more stringent.

The definition of what constitutes high profile or most significant violations for purposes of this audit should be reviewed and revised to truly focus on the major threats to public health or the environment. Again, with reduced resources both agencies need to target highest priority activities.

Ecology is pursuing streamlining many of our processes using Lean methods. One focus is streamlining the inspection process to allow us to use the freed up resources to inspect more businesses and reduce violations and releases to the environment. Thank you for your staff's participation in our Hazardous Waste Toxic Reduction (HWTR) Lean Inspection effort and, particularly, Jack Boller's assistance in working to streamline our workload associated with secondary violations. It is our hope that such efforts will provide us with improved results that will help us to meet the key SRF issues.

Due to declining resources, it is even more important that we are as effective in achieving changes in the environment as possible. As you are aware, EPA's reductions of the STAG grants provided to Washington total approximately $750K. Once Ecology's budget is clear, we would like to have a

discussion of reduced EPA expectations as a result of these budget reductions. Please contact Ecology's program managers for program specific issues or questions.

Thank you for the opportunity to provide comment and for considering Ecology's response to the Draft Report.

Sincerely,

Polly Zehm

Polly Zehm
Deputy Director

cc: Stuart Clark, Ecology, AQP
K Seiler, Ecology, HWTR
Kelly Susewind, Ecology, WQ

Appendix H: Response Letter from PSCAA

pscleanair.org
Puget Sound Clean Air Agency

Working together for clean air

June 11, 2013

Edward J Kowalski, Director
Office of Compliance and Enforcement
EPA, Region 10
1200 6th Avenue, Suite 900
Seattle, WA 98101

Dear Mr. Kowalski:

<u>Draft Report - State Review Framework (SRF) and Integrated Clean Water Act Permit Quality Review for Federal Fiscal Year 2011</u>

Thank you for sharing the Draft Report, dated April 29, 2013, and providing an opportunity to comment on the Draft Report before it is finalized. The regional staff that completed the file review for the Draft Report were clear and helpful in describing the review work they were performing and the conclusions in the Draft Report are consistent with the information we discussed with them.

The Draft Report identifies two major program findings for the Puget Sound Clean Air Agency (PSCAA) for which EPA requests follow-up action to address. The two findings and the EPA recommendations related to each finding are summarized as follows:

1. PSCAA is not entering Minimum Data Requirements (MDRs) into AFS in a timely manner (within 60 days of the event). This finding is specifically based on the expectations for Compliance Monitoring Data (60 days from date achieved) and Stack Test Data (120 days from test date).

Recommendation: Within 60 days of receiving the final SRF report, PSCAA shall propose a plan for improving the timeliness of MDR data entry into AFS.

2. PSCAA is taking appropriate but untimely enforcement actions to address High Priority Violations (HPVs). This finding is based on the expectations that HPV cases are resolved within 270 days of "Day 0".

Recommendation: Within 60 days of receiving the final SRF report, PSCAA shall conduct a workload analysis and prepare a report for EPA's review.

Phone 206.343.8800 or 1.800.552.3565 Fax 206.343.7522
1904 Third Avenue - Suite 105 Seattle WA 98101-3317

We have reviewed the data that these findings are based on and agree the data accurately reflects the agency's work to review the documents and report them to EPA. The agency's initial observations and responses to the two findings are provided below. Additional responses and comments will be considered and included in the plans prepared by the agency in response to the final SRF report, as referenced in the Major Follow-Up Actions section of the Draft Report.

1. Timely Reporting of MDRs

With respect to the timely reporting of MDRs, we were surprised that the SRF findings concluded the agency's reports were not considered timely. Approximately a decade ago, we were reporting MDRs on a quarterly basis in coordination with EPA input. When the EPA concluded that quarterly was not sufficient, we updated our procedures to report on a monthly frequency and have done so since October 2004. The last SRF report (from 2008) had no concerns about the timeliness of the agency's data submittals.

This finding has led the agency to further analyze why our monthly reporting system is not meeting EPA's data needs. The agency's current compliance systems are designed to ensure high quality documentation and decision making, and avoid rework. The agency's compliance reporting review system is structured to ensure every compliance report submitted by a source is reviewed. This review process includes review by the assigned engineer, assigned inspector, supervising inspector, and compliance systems staff person. Each reviewer has a different role and responsibility. These steps are only for the report review; enforcement actions trigger additional processes within our Compliance Division. The report review work is all completed and logged into our compliance database to support easy uploading of the MDR information to EPA's AFS database.

As stated in the Draft Report, during the file review, the agency indicated there may be an uploading (programming) timing issue between when information is entered into the agency's system and when data is uploaded into AFS. We have been investigating this timing issue and will continue to consider this part of our system during our response to address this finding. This report review system was developed to ensure reviews were completed and that the compliance data was accurate and complete prior to uploading any information to AFS. Data is uploaded monthly, and the data for each month is submitted 30 days after the end of the reported month (e.g. April's data is uploaded at the end of May). This reporting sequence was selected to ensure the reported data was stable (no changes to be made after uploading to EPA) and to provide time for enforcement action initiated in that month to be completely data entered.

We agree with the recommendation in the Draft Report, that within 60 days of receiving the final SRF report, the agency will propose a plan for improving the timeliness of MDR data entry into AFS. This will include a report on how data will be entered in a timely fashion to meet MDR requirements, an implementation schedule, and the effort required to implement this effort. We may be able to shorten the wait time for data stabilization immediately prior to uploading. Possible future changes to assist with faster uploading of data to EPA will have to be weighed against the risks to data quality. Also, although the Draft Report mentions including a work load analysis as part of the plan, this may not be necessary or appropriate given that work load issues may not be the real cause of this finding.

2. Timely Resolution of HPVs

With respect to the timely resolution of HPV cases, we will carefully review the details of the cases identified as late and provide more input in the final report prepared in relation to this finding. It is important to remember that there are several process steps available to sources during the enforcement process. Thus, we are not fully in control of the schedule throughout those processes. As has been identified in the draft report, many of our HPV cases are complex and consist of multiple notices of violation over several months that are all the same case.

We agree with the recommendation in the Draft Report, that within 60 days of receiving the final SRF report, the agency will prepare a report for EPA's review. The report will delineate the actions the agency can take to address HPVs in a timely manner, an implementation schedule, and the effort required to meet this schedule. Also, although the Draft Report mentions conducting a work load analysis as part of responding to this finding, this may not be necessary or appropriate given that work load issues may not be the real cause of this finding.

Your cover letter also suggested that we specifically review Appendix E to see if the overview information about our program was adequate. In response to that request, we have attached additional information about our program that you may want to consider adding to the report.

Again, thank you for the opportunity for provide initial comments on the Draft Report. We look forward to continuing our combined efforts to provide reliable information that accurately reflects the environmental benefits of the compliance work we have committed to provide. Please feel free to contact me or others at our Agency if you need further information to help finalize this report.

Sincerely,

Craig T. Kenworthy
Executive Director

Enclosure

cc: Laurie Halvorson
Steve Van Slyke